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THE CRITIQUE

VOLUME XVI

January to December, 1909

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PUBLISHED BY
THE DENVER JOURNAL PUBLISHING COMPANY
DENVER, COLORADO

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ORIGINAL ARTICLE

No.
1

Denver, Colorado, January 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

PERCEIVING THE PATIENT IN THE RECORD.

Julia C. Loos, M. D., H. M.

WE HAVE emphasized the important items in the investigation of any individual case of disorder which include the collection of all the disturbances which the patient voluntarily reports, the changes observed by the attendants and the physician's own observations plus the modalities of the various symptoms; aggravations and ameliorations of time and all modifying influences. The record is not entirely complete without the account of the habits of the patient and previous history and enough of family history to indicate the nature of the disorders of progenitors. Such history frequently illuminates what would otherwise be obscure conditions in the individual under consideration.

The next step is to make valuable use of the record obtained and this applies equally to the written record and that which is collected for use in the mind of the prescriber without writing. Of course no satisfactory study can be made without having the details on paper for constant reference without possibility of lapses in recollection.

We have emphasized the combined characteristics of the case as the guide to the prescription. It is necessary to detect in each case what are these characteristics. It may be admitted at this point that this particular step in the work is not always easy, but it becomes easier with every effort in this direction and year after year if you follow this plan you realize that the mental grasp of the characteristics of a case is firmer and clearer. The most obvious features and the most troublesome features

are not always the characteristic ones, but the characteristics are revealed in the small details of these.

TIME.

Time has an influence in such a large number of conditions that we investigate usually that phase. It may be that the patient or his attendant has observed no decided aggravation of his entire condition at definite times but will record that certain symptoms are usually worse in some part of the day or night. Cough, diarrhoea, headache or some other symptoms occur regularly at the same time of day, although the patient would say he is no worse than he is when it occurs at any other time. The occurrence of the symptoms at that time constitutes the time aggravation in that case. Hence you perceive he is worse every evening, or after midnight, or at night or in the morning.

FEVER.

Scan the record again to detect the nature of the patient's complaint's. If there is fever present it may or may not be important, according to the nature of the disturbance. Every acute miasm includes rise of temperature in its symptomatology. Fever, therefore, is classed as a common feature in acute miasms and is not of use in distinguishing the case. The type of fever, however, may be marked and characterize the disorder. Observe whether the fever is remittent, continued, intermittent, inflammatory, septic or zymotic, also the time of day that the highest temperature occurs. It is not uncommon among those who do not seek characteristics, to aim their prescription or one prescription among many, at the fever. There appears to be an impression that fever is a menace to the patient and must be combated. Fever is an accompaniment of the condition and may be no more serious in certain cases than sneezing in a case of coryza. With our rational view of disorder we shall not be affrighted because of its presence but use what evidence it reveals to restore order throughout, then the fever subsides because there is nothing to occasion it.

PAIN.

The presence of pain is perhaps most variable as valuation is considered. To the patient, pain is a very important consideration but not always so as a prescription guide, though the pre-

scriber desires to eliminate it. There are certain conditions of which pain is a common feature. The classic definition of inflammation includes the color. In inflammation of any part pain is to be expected. Inflammation without pain is peculiar. The painlessness may characterize the case, becoming a strong characteristic. Though pain is common in inflammations, the character of pain varies. Pain is translated into different sensations by different patients and the pathologist can offer no explanation why one should experience a drawing, one, a stinging or burning one, a pressing pain. The character of pain, therefore, may distinguish the case wherever pains occur. More important than the character of pain may be the occasions that aggravate or ameliorate the suffering in the various parts. The man who explains everything will elaborately discourse on the part the sensitive nerves play, the action of the part affected as a reason for the pain, etc., etc., but observation reveals that in some individuals motion relieves pains that are aggravated by motion in others; that reason will not determine whether pressure, rubbing or touch ameliorates or aggravates the pain, but the patient will quickly tell you that heat, cold, various positions, sleep, weather changes, time of day, phases of the moon (time of month), bathing, noise, even the various functions of parts not experiencing the pain, exert varying influence on the individual case of the pains in local disturbances. Thus the modalities of the patient are built up from the evidence in the local manifestations of pain. When the pain can be rationally explained as a pressure symptom or any other common basis, it is no longer distinctive and characteristic.

FUNCTIONAL DISTURBANCES.

Functional disturbances in any individual case of disorder are as variable as pain, considered as guiding lines for a prescription. When the functional disturbance is entirely consequent upon the local condition it is common and unimportant. Vomiting in cancer or ulcer of stomach, watery or mushy evacuations in cholera or typhoid fever, paralysis in apoplexy, etc., are common expressions of the condition, not characteristic of any individual suffering that disorder. Peculiarities of the vomiting, of the diarrhoea, unaccountable features in the paralyzed

parts are characteristic of the individual, strange, rare, unusual forms. Thus the local affection becomes the avenue through which the characteristics are expressed: time, position, circumstances of various sorts modify the common features.

TISSUES AND FORMS OF DISORDER.

Abscesses, atrophy of parts, cancerous ulcers, catarrh, chorea, cyanosis, indurations, paralysis, lack of reaction, relaxation of muscles, indicate the general disorder of the patient but are manifestations in various localities: generals built out of particular or local manifestations. Similarly we recognize in local manifestations the evidences of anaemia, chlorosis, inflammation of various tissues, injuries, sensitiveness in various parts, swelling of different tissues, all of which come under the head of generals.

DISCHARGES.

Normally the fluids and discharges of the body are odorless, each of definite color and character, and non-irritating. When they present abnormal colors, consistence, become offensive and excoriating, it represents the abnormal functioning of the tissues. These also may characterize the individual, when the same character of discharges is manifest in various places. Pulsatilla has bland discharges from mucous membranes except the leucorrhœa, which is acrid.

APPARENT DESCREPANCIES.

This suggests another peculiarity. In some remedies and some disordered constitutions, general modalities will obtain in all but one or two phases, and here the modalities may be opposite to those of other parts. The patient in most disturbances may want to be warm but in certain head pains want cold on the head. Phosphorus wants cold things in the stomach and head and warm things for thorax disturbances and pains through the body. There may be restlessness and desire for motion, with aggravation of pain from motion of the affected part. Cina wants to be in motion and cina children want to be carried, but the touch of lifting them occasions an aggravation of the soreness.

Thus must the record be studied to determine what are the symptoms characteristic, whose totality sketches the image of

the disordered patient. Truly indeed is the work half done when this image is determined. With this basis we are prepared to open the repertory and search the similar remedies and the one most similar. It is far from a homeopathic prescription to select that which has one or two or even three of the characteristics if there are other characteristics which are entirely foreign to that remedy. If the correct three are selected that may serve, but all the characteristics must be considered and used in the test to be certain that such remedy is indeed the *most similar*.

The degree to which the similarity approaches is by no means the measure of the value of other remedies. While the most similar remedy will search to the innermost and restore order from the innermost to the outermost, generals and particulars, that which is somewhat similar yet opposite or unrelated in some lines will not eradicate even those things which are similar, for it is not the remedy that has the entrance key to unlock the innermost where the origin of the disturbance resides. It may sometimes palliate temporarily but the changes that follow mislead the prescriber and distort the image upon which the prescriptions must be made. Some local manifestations may be altered but the disturbance is not reached at its origin and will continue to express itself.

CASE:

The following brief report may illustrate:

A woman of 27 years, at the close of her third parturition had hemorrhage of dark, unclotted blood from a uterus in which the placenta was so adherent that it was forcibly removed. Symptoms of loss of blood appeared almost as soon as the hemorrhage was apparent. These symptoms were checked and involution occurred under treatment. Before 48 hours passed, fever developed. Lochia at first was very light color, watery, and, later, thin, brown, acrid, offensive, so scanty as to suggest that it was suppressed, with the accompanying fever. Headache was the most troublesome complaint to the patient. Fever did not recede below 101°, with pulse of 120. By the use of the repertory, you can easily confirm the hint that the features of the lochia have perhaps given; that secale is called for. Under

its influence, every abnormal feature of the lochia was changed, except that dependent upon actual loss of blood; the temperature reached 99° and the pulse 100, and the distressing headache disappeared within 48 hours.

The details of the lochia strongly expressed the character of that patient in disorder. If it had been used earlier, the more serious condition would not have developed.

Harrisburg, Pa.

WHEN THE MATERIAL ELEMENTS OF A DRUG HAVE BEEN ELIMINATED BY POTENTIZATION, WHAT IS LEFT? NO. 2.

By J. C. Holloway, M. D.

AFTER that potency is reached which was preferred by Hahnemann and Boenninghausen, there is left the *real, curative power* of the drug. Not its material, sensible elements, but *the spirit of the drug*, so unfolded and developed that it is now, if the simillimum, adapted to its task of touching the vital force and causing a reaction; and to this end is more penetrating and effective. Our friends, the enemy, have long made it an effective fighting point to impress the people with the fact that homeopathic remedies are inert because devoid of all killing power. The doctor says: "Why! I could eat a hat full of those pellets or tablets and they would not kill me!" And, because the "doctor" has spoken, it must be true; and if true that they cannot kill, as a matter of course, as everybody knows, they cannot cure! If there is one medical doctrine more than another with which the masses are acquainted, it is the teaching that a medicine, in order to demonstrate its power to cure, must first display its power to kill! And in keeping with this doctrine, the time was, and is not out of mind even with the writer, when the people thought that in order to be cured they must first be made very sick—salivated, etc.! Now, the proper answer to this "regular" method of opposing Homeopathy is, by public lectures and newspaper articles, this explanation: At great pains and expense we have purposely thrown away by our process of potentization, the crude elements of drugs, so that how-

ever poisonous a medicine may be at the beginning of potentization, when properly potentized and ready for homeopathic use the killing power has been completely eliminated so that *no amount* of such a potency can possibly kill. But while thus getting rid of the killing power we have, by this potentizing process, uncovered and brought to the surface the invisible but curative power of that drug, namely, the *drug-spirit*, which was hidden in its inner nature. It was while elucidating this doctrine that Hahnemann said: "The praise bestowed of late years by some few homeopathists on the larger dose is owing to this: either that they chose low dynamizations of the medicine to be administered, as I myself used to do twenty years ago, from not knowing any better, or that the medicines selected were not perfectly homeopathic." (Organon. Foot-note, p. 188.) It is not denied that the founder of Homeopathy once used low potencies, which is a pet argument of mongrels, but let the civilized world now understand that he himself said it was "*from not knowing any better.*"

No materialist can ever hope to be a successful Homeopath until he divests himself wholly and completely of his materialism. The power of drugs to cure does not decrease in the ratio that their material substance is diminished, but rather just the converse. And Hahnemann not only taught this, but emphasized it. This men *must* learn in order to practice Homeopathy. And this is one item, at least, which mongrels have never learned, for no man can remain a mongrel for an hour after comprehending this one point. Hahnemann said: "The smallest possible dose." That would be the *minimum* dose; but the *material* dose can never be the minimum dose. The mystic power that touches the vital force and extinguishes disease is not the material dose, but the *drug-spirit*; and in all genuine potencies it is this *drug-spirit* that is left, and it is the material, sensible elements which have been eliminated. Still, how common to see this in mongrel literature: "Just as though the dose had anything to do with Homeopathy!" Whenever you see or hear that phraseology, mark it this way: *Mongrelism gone to seed.* No true homeopath ever used such language, for he very well knows that the minimum dose is just as important as the law of similars; and that

the *single remedy* is not a whit behind either. These three principles were sacred with Hahnemann, and have always been honored by all his true followers. But with the average "regular" and mongrel there is more *potency* in an *automobile* than in any preparation of drugs!

Every drug possesses a dual nature: its inner and outer. The outer affords color, taste, killing properties, etc.; the inner contains a hidden dynamis, the drug-spirit, the power to cure. The latter is unfolded and developed by dynamization. This process was the discovery of Hahnemann, the founder of Homeopathy, and is one of the greatest inventions in the history of the human race. But what a burlesque that even his own pretended followers do not appreciate it! We are so used to measuring force or estimating power from a material standpoint that it is hard to conceive the fact that a drug potentized until its color and taste disappear, and until the chemist cannot find the slightest trace of its original, material, sensible elements, and therefore cannot identify the drug by any known chemical law, is more penetrating and more powerful than the same drug in its crude form.

Suppose a practitioner has prescribed the third or sixth. If it fails to work and he is sure of his selection, he does one of two things: (1) he tries the tinctures, or the crude form of the drug, thus betraying his ignorance of potentization; or (2) he chooses a higher potency, one which is more powerful and which will penetrate deeper, and thus evinces the fact that he has learned of the master and that he is in deed, as well as by profession, a homeopath.

When a doctor learns enough Homeopathy to cure coughs and the old-fashioned chills and fever or ague, with the 200th or 50th or C.M. potency, then he will understand what is left in the process of potentization after the material elements all disappear. But so long as he resorts to crude quinine, or crude anything to "break" the chills, or to opiates to suppress the cough, he don't know much! How is that, doctor? You say you rely upon nux and ipecac either in the tincture or low potency given in alternation for chills, and that you count yourself a Homeopath? Well, you are the gentleman I am talking to;

and I repeat: as to the pure homeopathic philosophy, and as to the fundamental and essential principles of pure Homeopathy, you don't know much! You have never caught the spirit of Homeopathy or you would never be guilty of alternating under any circumstances whatsoever; and you do not understand the power of dynamization, or you would know that tinctures and low potencies can only reach very superficial complaints. You do not seem to know what is left when the color and taste disappear. Many so-called Homeopaths are so materialistic that, like Allopaths, they want medicines to show their color, and taste *nasty!* Remember this: The *vital force of the human system* is immaterial; *disease causes* are immaterial; and the *curative power of drugs* is immaterial. Hence, the true homeopathic cure is always the ideal cure, namely, rapid, gentle and permanent; and such cures are made with the dynamized drug. The more "heroic" a doctor is, the more ignorant he is of the true healing art. Materialistic doctors surrounding a sick bed remind me of a pup at a brush pile! They have *named* the thing; and they have loaded their therapeutical guns with crude, material shot. Now they are looking for something *material* in the patient which is to be routed before he can be cured.

Individualization in each prescription; the single remedy; the law of similars, and the minimum dose. These make the Homeopath, and these make the ideal cures. Do not give up in despair. Study Hahnemann; study his Organon daily; his Chronic Diseases; his Lesser Writings; his "Therapeutic Hints," by R. E. Dudgeon. You cannot be more ignorant of pure Homeopathy than I was when J. T. Kent found me; and I can now cure acute colds, coughs and intermittent fever with potencies—200th and up. So do not become discouraged and imagine that there is a shorter road and easier method—such as Dr. Blank's Combination Tablets for Indigestion, etc., but work and dig and study and *stick to pure homeopathic principles*—just plain homeopathic doctrine as preached and practiced by Samuel Hahnemann, and as now taught and practiced by such men as J. T. Kent, H. C. Allen, E. B. Nash, *et al.*, all of whom can cure patients who would die under any mongrel, because they know how to find the indicated, individualized remedy for

each patient, and for the same patient at different times, while the mongrel blindly experiments with combination tablets for a disease *per se*, or prescribes a certain treatment for Jones because it cured Smith. A patient is far more fortunate if left to the tender care of Nature than to be in the hands of a professional ignoramus like that.

Hahnemann and his true followers have furnished the cures —moulded the character and fixed the destiny of pure Homeopathy, while mongrels always have and still hang on to the glory of the name, feast upon the rich heritage of those great physicians by claiming their reputation, and all because of the deplorable, lamentable ignorance of the general public as to what pure Homeopathy is. But let me appeal especially to young and middle-aged physicians:

Study the Organon. Study Dunham. Study every line you can find from Boenninghausen.

Study Kent's *Materia Medica*, *Homeopathic Philosophy* and *Repertory*.

Study Hering's *Guiding Symptoms* and Knerr's *Repertory* to same.

Study H. C. Allen on Intermittent Fever, and also on Consumption.

Study the old copies of the *Homeopathic Physician* whenever you can find them, and also of *The Critique* and *Medical Advance*, and every other journal true to the faith.

Feast upon the books, pamphlets and articles of all true homeopaths, even though the authors have ceased to speak by tongue.

Study these and you may learn the wrinkle yet.
Galesburg, Ill.

SPECIAL ARTICLE

TUBERCULOSIS—ITS ETIOLOGY AND PROPHYLAXIS.*

By R. del Mas, Ph. D., M. D.

BEFORE any of us were born, pulmonary consumption was known by the medical profession. The Greek pathologists treated of the disease under two branches; *phthisis* and *phthoe*; the first importing abscess of the lungs, and the second ulceration of the lungs. The terms are those of Hippocrates.

One hundred years ago, or thereabouts, the *tubercle* was spoken of by medical writers, but it remained for the modern pathologist to give us a minute description of it. Still, in those days, the causative factor of the tubercle was believed to be in an *unhealthy action of the vital power, which is directed to definite or instinctive ends, when working normally; but giving rise to the most anomalous results when deprived of its intelligent organization*.¹ With progress, this idea or theory would change—it would have its up-to-date successor. When microbes began to be detected, exorcism and antiphlogism were doomed, and soon obliged to retire from the therapeutic field. Indeed, the cause of all diseases was the *germ*; the extinction of the germ by agents acting directly upon it, was health restored upon its divine throne. The Bacteriologist, haunted by thet germ mania (and Germania, too), worked day and night in his sanctum, and had soon turned out antitoxins (some of which are still in process of clarification) for each and every disease name. His head was decked with laurels (Aesculapius of Epidaurus) for he had conquered disease. *Beati pauperes spiritu.*

Still, experience which is just as wise as mania and the oracle, began to proclaim in the Roman forum that *antitoxins* (the

*Written for the Minnesota State Homeopathic Institute, Session of May, 1908.

¹Good's Study of Medicine.

new nectars) were but a delusion of the high-priests of the Allopathic credo, that the introduction into the human system of *death products* could never raise an iota the energy of the cell; and that, once antitoxinated, the body had to fight both the primary disturbing element of the disease proper, and the destroying influence of the putrid animal product.

Some Senators of the Medical Republic began to say, and wisely, from all appearances, that *tonics* were better than *poisons* for a man (and a woman also), who had a *weak backbone*. They argued that a *lowered* vitality always preceded as a basis for the establishment in the economy of an infectious or contagious disease; that, had the strength of the organism been on a footing equal or superior to that of the disease cause, the latter would have been forced to direct its baneful energy upon subjects less protected; and they rounded up saying that, in contagious or infectious maladies, the rational therapy is that which is capable of raising the strength of the economy to a level equal or superior to that of the disease cause; then and there the two forces would meet, with *inertia of the destructive agent, and the free re-establishment of the constructive element*, law and order reigning supreme, as a natural consequence, of course.

This much as a preamble. Pardon me for having tried to follow the lines (which I did not establish) of artistic oratory, in not entering *ex abrupto* a much controverted subject. From your smiles I can see that I am not the voice of him who cries in the desert, and that the words of Terentius Afer will not come true in this case, when he says: “*Veritas odium parit, truth begets hate.*”

In the year 1881 of our Lord, a German scientist named Koch discovered the scavenger of the lungs; and, I think, named it *Bacillus Tuberculosis*, and gave the scientific world the physiognomy of his pet, that we might know and challenge him on the battlefield. A firearm was also invented by Koch, with which to shoot *Bacillus* down. He called it *tuberculin*. It was of no use, for, instead of killing the germ alone, it killed both the patient and the germ. Great contrivance! Of course, *tuberculin* was soon discarded as a useless warfare engine to attack

Bacillus with. But, I am told that scores of firearms built on the same model or principle as that of Koch, have been tried since, and with as sad results. Let us hope we will shoulder, some day, a never-miss rifle when hunting *Bacillus Tuberculosis*.

This much as an *entree*. Have you not been served, at some of your Bacteriological banquets, courses known as: *Hereditary or congenital Tuberculosis* is very rare? *Acquired Tuberculosis by inhalation, by inoculation, and by the ingestion of Tuberculosis meat or milk?* Yes, you have, and all of you. How did you relish them? You will pardon me for telling you what my *sense of taste* felt when I had to partake of them.

On the 5th of December, 1867, Villemin read before the French Academy of Medicine, a report made of experiments tending to prove the *transmission of tuberculosis* to animals by *inoculation*. Fourteen years later, Koch discovered the agent of transmission; that is, the *Bacillus Tuberculosis*. Consequentially tuberculosis was soon, and the world over, considered as a *contagious* disease that gained entrance into the body by *inoculation*, plus *inspiration*, plus *ingestion*. Great thing! Still no heed was paid to the protest of eminent clinicians and bacteriologists. There was neither money nor fame in that. The public was scared (what fun!) and soon infatuated (as it still is and will be for a long while) with regulations and teachings emanating from scientific(?) and administrative quarters to exterminate the white plague, or, rather, its pathogenic germ. You know how a consumptive is looked upon today by the public and nine-tenths of the medical brethren.

Kelsch has demonstrated the *extreme difficulty* encountered when one tries to pulverize (even in an agate mortar) a dry sputum, and the harmlessness of dry dust containing sputa of tubercular patients when solutions are made and injected into guinea pigs. It is a scientific fact that sputum exposed 48 hours to a diffused light is rendered *steril*. What about it, were it bathed in full daylight? Have you ever noticed how much of their time children will spend in licking the floor of their rooms or the handkerchiefs in which spit their tubercular parents? Yes, how long? Oh! tell me.

I beg leave to confess most humbly that my palate never

eraved for that *sensible* idea of tubercular contagion by inspiration. Today this etiological factor must be eliminated from the list of the causes of tuberculosis, since it is proven that tubercular transmission follows either the lymphatic channels or the blood-vessels, and *never* the *respiratory tract*, according to laboratory experiments.

Bacteriological researches have established the fact that when the *young* animal is fed on food containing tubercular bacilli (of the bovine kind) in large quantities, *tabes mesenterica* is developed *first*, and only *later* the *mediastinum* is tubercularly affected, *but not the lungs*; while the *adult* animal submitted to the same experimental infection will *never* develop *tabes mesenterica*, but the virus will follow the *thoracic duct*, and *directly affect the lungs*.

That tuberculosis is contagious by *inoculation*, no one denies; but facts tending to prove it are extremely rare; that is, *inoculated tuberculosis* in man is exceedingly rare, and would require a great number of bacilli to produce it.

But, what about *ingested tuberculosis*? The scientific school of medicine that sees today his devils of yesterday, under the shape of pathogenic germs, creeping in and among the cells, still holds to a great extent to the idea or theory of *inspirated tuberculosis*; but it will not be long before it abandons that delusion entirely, if it is *sensible*—*the school*, I mean.

We all have heard lately about the bovine virus, the transmission of tuberculosis to man by milk, cheese, butter and meat of tubercular cows. Laboratory experiments have proven that calves, lambs and other young animals fed on milk loaded with tuberculosis bacilli became tubercular (*tabes mesenterica*); but is that sufficient proof that men fed on the same milk will become tubercular? *NO!*

The Koch bacillus formed in man, cows and gallinaceans, bears, in the three classes, the same characters as an organized being, but its pathogenic properties are different in each class. The most virulent of the three is the bovine microbe; next comes the human; and last and least the avicular.

There has not been as yet a clean-cut clinical case presented for the consideration of the medical world to demonstrate the

fact that the bovine bacillus is transmissible to man and capable of giving rise in him to tuberculosis. In order to prove that tuberculosis is transmissible to man by milk, butter, cheese and meat, the following conditions are required:

- (1) The Koch bacillus must be present in the food ingested.
- (2) Tuberculosis must begin its development in the mesenteric ganglions if it be an infant, and in the lungs if it be an adult.
- (3) No other cause must be at work, to transmit tuberculosis.

We are still waiting for a scientific fact based upon this tripod. Still the scientific circles are active in lying. Turmoil has gained the administrative quarters regulating public hygiene; but sift the thing down, and you will find bubbles, wind, bluff and conceit coupled with ignorance, treachery, falsehood and hypocrisy. This is what we call the medical science of the scientific school of medicine of this scientific century! The chameleon-like newspapers swallow the oracle of Aesculapius of Epidaurus, and repeat: "Amen" in saecula saeculorum. They play the part of Monsieur Jocrisse, and deck their brows with laurels. What a fame! What a service rendered to humanity! What divine Mentors! * * * * *

Balthazard (the same man who took samples of milk from 50 milkmen in Paris and could not inoculate guinea pigs with) read a memoir before the Congress of Tuberculosis, 1905, in which one finds the following lines:

"Clinic, through its observations, confirms one in the opinion that milk has very little to do in the etiology of tuberculosis. Mesenteric Tuberculosis (which in young animals is constantly present, in the ingested form) is, in fact, as frequently met with in certain localities of Spain, where the infants are almost exclusively fed on goat's or sheep's milk (both milks were never found yet to contain Koch bacillus), as in France, and especially England where cow's milk constitutes the principal food of the new-born."

The examination made in Paris by Poisson of 2,500 children varying from 7 to 9 years of age revealed the fact that 96

per cent. of them were affected with tabes mesenterica. (See Poisson, *Adenopathie Tuberculeuse*).

I once more beg leave to confess that my sense of taste always rebelled against the *scientific* proposition that the bovine bacillus was, by ingestion, one of the primordial factors in developing tuberculosis in man.

Experimental facts tend to prove today that Koch was right when he contended that the human tuberculin had only local effects when injected into the bovine kind, while the bovine virus produced general and disastrous results in the same class of animals.

Experiments made with the bovine virus upon men—although not so numerous as those performed with the human virus upon the bovine kind—would show that its action was only local, and not general. Hence, we might truly conclude that the two germs, which are identical when morphologically studied, are different when pathogenically considered.

It is absurd to contend that tuberculosis in man is transmitted by *inhalation*, and undemonstrable that it was ever originated by *ingestion*. And, since the cases caused by *inoculation* are infinitely rare (or merely accidental) we will say, with your kind permission, that our palate savors with relish the opinion that *consumption is, was and will ever be a hereditary or congenital disease*. It is a 'family' disease. Who will destroy the monumental testimony of Poisson? Who has already contradicted Balthazard?

The parent transmits to his offspring *not* the *tissué-soleil*, but the *seed* or *miasm* instead. This is paradoxical, will you say at first sight, because we all have been taught to walk on our heads, but, on a close examination of the facts, you will admit it is true.

Tuberculosis is a constitutional malady varying in its manifestations according to the age of the patient. In the *child* we will find *scrofulous glands, white abscess, bone affections* and *Tubercular meningitis*. It is grave enough; but the *pulmonary form* will especially be found not in the infant, but in the *adult*. Regarding the *adolescent*, the manifestations of the disease will also be multiple; but the characteristic will be a *remittant fever*.

often mistaken for typhoid, followed by general emaciation and debility, with the development of successive Tubercular foci in several parts of the anatomy, the serous membranes being the most easily affected. And in the old, we will find either pulmonary consumption taking them away inside of a few months as a sequel of pneumonia, pleurisy, bronchitis, or la grippe, or else glandular abscesses discharging purulent matter and stubborn to local treatment, of course.

Tuberculosis is inherited, like syphilis, sycosis and psora. It has three stages, the three steps of human life. It is the offspring of psora and syphilis and remains quiescent or comes to the surface according to the action of exciting causes that prepare the soil for the germination of the seed already present in it.

If, in a certain sense, it may be said that psora and syphilis blended together furnish the soil for Koch bacillus, it is more in conformity with truth to say that they *Father* the germ. In the words of J. H. Allen: "They are the propagators of the tubercular processes and the tubercular bacilli in toto. * * *
"Is there no relation between tubercular affections proper and inherited syphilis pathology?"

How can the white plague be eradicated from the earth? To exterminate it entirely—it is impossible. Every man born is psoric; and if 96 per cent. of children have tubercular mesenteries (see Poisson), and tuberculosis (the seed of it) is begotten through the union of syphilis with psora, tell me how many men (and women as well) living are free from the *syphilitic taint*, and I will closely guess how many human bodies will in all probability not die from tuberculosis. Is it to be wondered at that this disease is called a *plague*? Oh; please, go backward; follow the steps of mankind from the torpedo-boat to the raft and arrow, and count its sins, both of omission and commission. Is there light everywhere in the path? Where are the *untainted*? Where does the taint *begin*? Is the taint *simple*, or *multiple*? Men fall under physiological laws (the body's) and moral laws (the mind's). Can any of those laws be violated

²The Chronic Miasms.

without chastisement supervening? And, is not the mind the master of the body? And, if the mind sees things irrationally, will it guide the body rationally? It may be said once more, and truly, death entered the body through the mind, through the will of man; and, I will humbly add, life (health) will re-enter the body through the way it went out, that is, through the mind. As a digression from the subject, it might be reminded that Hahnemann's conception of the etiology and therapy of diseases was as much above the medical brow as the heavens above the earth. Let us teach our medical students how to think. If we have so many crude men in our ranks it is because their gray matter is without culture and profundity. Let me pity the man who offers me the *resection of the vasa and oviducts* as the Archimedes' lever that will raise the human clay to the level of the heavenly spirits, or thereabout. I shall pry on it as often as the clock will strike, but I will get it (the clay) there (to heaven) just the same, provided the lever does not break or the clay want to be moved. And the fulerum will lie (and continue to *lie ad vitam aeternam*) in the *Golden Gate*.

Do you believe tuberculosis will be prevented by all these delusive measures invented by an army of deluded mortals that forbid you from spitting here and there, from having your linen washed here or there, and your milk drawn from here or there? Do you suppose that a laboratory will ever turn out a *panacea* that will cure all tubercular patients, or prevent men from having tuberculosis? Is any malady, which is not thoroughly traumatic in origin, a thing one can see, palpate, smell and taste? And still the headlights of the crawfish-like medical chariot want you to believe all of that, and more than that. But you are too intelligent and sane to harbor such foolish notions in your brains. Hahnemann lightens your way.

Your prophylaxis will consist in preventing the soil from becoming favorable to the germination of the tubercular seed it carries within its recesses. You will especially take care (or see that the proper care is taken) of the child born of delicate parents, or in a family where tuberculosis has prevailed. You will not relegate consumptives into a corner of the earth where no human beings are living, nor send them to altitudes where the

changes in temperature are sudden and great. You will see that their rooms be located on the southwest side of the house, with windows on the south and west sides. You will advocate plenty of fresh air and sunlight, regulated exercise, pulmonary gymnastics, deep breathing, good, substantial food, good clothes, regular feeding and living, temperance and *other things* along that *moral* line. When you are called to treat a patient affected of coryza, catarrh of the nose and throat (and of any other part of the system) you will remember that *local* treatment is *scientific* but not *homeopathic*. If you meet enlarged glands of the neck you will bear in mind that on dissecting out said glands you *cure the glands*, and *kill the patient*. Ointments will you discard, because an eruption marks a hidden malady that must be dug out with a constitutional treatment.

You will exercise that natural talent of yours that homeopathic training has developed, and which makes you class diseases as well as remedies under the headings known as: Psoric, syphilitic and sycotic, and choose with care from the list the remedy that *fits the patient*. You will never lose sight of the fact that any *taint* requires time, patience and skill (hard work and common sense) in order to leave the premises under the command of the *indicated* remedy or remedies. And knowing that we have (that there is) no *organotherapy* (there exists only homotherapy), you will not entertain the misleading (and flattering) idea that tuberculinum and bacillinum are sure shots to cure or prevent tuberculosis. If the patient was as *cold* as silicea, tuberculinum would *not* be the remedy; *calcarea silicata* might be required. Tuberculinum cures precisely where we find *no definite* symptoms; it stirs up things when the taint, so well spoken of by Burnett, is there. Kent says that “*Calcarea* and *tuberculinum* are interchangeable; that is, the one may be indicated for a while and then the other; also *silica* is closely related to *tuberculinum*” ³ and the great master in *Materia Medica* told me some time ago that in a quiet patient, sweating all the time, with greenish or greenish-yellow expectoration, *calcarea silicata* seemed to fit like a glove. *Calcarea* and *silica* are very

³Kent's *Materia Medica*.

deep remedies. Their union must give rise to a deeper action. Hence, tuberculinum is a very deep-acting remedy also, and should be given high and in single doses followed by pounds of sac. lac. and tons of expectation (the opinion of the greater eagles notwithstanding). In no case must a remedy be given if it is *not* indicated. Discrimination makes homeopathy an art, and its practitioner an artist.

During the acute manifestations of apsoric organism you will see whether your patient needs or not a *constitutional* remedy to correct the lack of reaction. And the lingering convalescence, mental depression and bodily weakness will be the road signs pointing toward this or that miasm, and this or that remedy.

Your prophylaxis will also consist in favoring those laws which tend to keep things and persons clean and orderly, do away with graft and money oppression that the poor be treated more humanely and have a stone where to rest his head in the sun; not in the shade.

You will do your best in diffusing light among the public that the *unjust* and *unwise* panic and terror at the sight and hearing of a consumptive be replaced by kindly feelings and charitable pity toward him whose sad lot was to *develop the soil where germinated the tubercular seed nature deposited into his innermost*.

And last, but not least, you will ever remain familiar with our principles of practice and faithful to them, that with the aid of the law of *Similia*, you may, to the best of your knowledge and opportunity, diminish the appalling number of tubercular victims, and be both scientists and philanthropists.

Centerville, Minn.

CONTRIBUTED

EDITOR OF THE CRITIQUE: I have been interested in Dr. Loos' article in the October number of THE CRITIQUE on repertories. But there is one statement there that is so far from fact, so complacently misleading, that it should be corrected. Dr. Loos says that Kent's Repertory "includes all of value in repertorial forms in preceding repertories, general and special, all that could be gleaned of reliable symptomatology in the 'Guiding Symptoms,' etc." If Dr. Loos would take just a little time to compare the rubries of Kent's Repertory with those of the "Pocket Book," Lippe's and the "Symptom Register," she will find a mass of glaring omissions of important symptoms from which the corresponding remedy is omitted in Kent's Repertory. The same may be said of Allen's Encyclopedia. In difficult cases one has to search all these books to be sure and include all the remedies which may be possible candidates for choice. Not only this, but Knerr's Repertory contains a quantity of most important rubries, even general rubries, which cannot be found in Kent's, e. g., "Stooping," "Sitting erect," "Sitting bent," "Darkness," "Granulation," etc.

Dr. Kent did a grand work in compiling his repertory. In my opinion it is quite superior to any other. But that there are glaring omissions must be patent to any one who is determined to do thorough work. The ideal or complete repertory has not been compiled yet.

We should not be contented to believe it without examining the evidence.

Yours truly,

ROYAL E. S. HAYES.

Farmington, Conn., Nov. 27, 1908.

* * *

REPLY TO AN OPEN LETTER CONCERNING LACHESIS.

EDITOR OF THE CRITIQUE: In your December number, page 417, you publish "an open letter" which indirectly refers to our firm. To this we ask space to reply, not in a similar vein, but by a statement of facts.

Some months ago newspaper readers were given, with headlines and illustrations, an account of the extracting of venom from a Lachesis snake; the homeopathic journals also—and quite properly—announced the securing of a “new and fresh supply of Lachesis.” As there are twenty-one varieties of Lachesis snakes, we investigated the matter, and discovered that this one was the common South American lance-headed viper, *Bothrops lanceolatus*, and not “the terrible monster of Dutch Guiana” whose venom had been proven by Hering. This fact we made known.

Nearly all the homeopathic journals had announced the “new supply” of the venom, but very few of them so far have published the fact that it was not the right venom. The firm that made the grave error now acknowledges it by stating in their “open letter”: “we have secured another live snake, a *Lachesis Mutus*.” They also state: “We have no inclination to enter into a discussion in regards to the statements which have been made in certain trade journals controlled by a competing house, as to the correctness of the facts given in their own publication, etc.

It seemed to us to be a duty on our part to make known an error connected with one of Homeopathy’s greatest remedies and we did it, though fearing our motive would be misrepresented as has proved to be the case. It was also stated in the newspaper accounts that the “supply” of the venom was “exhausted” and what was not “exhausted” was “inert.” Those who know the facts in the matter are aware that both these assertions are without the slightest foundation in truth. We can say nothing as to the authenticity of the last snake, not having examined it, nor do we intend to do anything further in the matter.

Very truly yours,

BOERICKE & TAFEL, Inc..

Philadelphia, Dec. 8, 1908.

* * *

THE SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION is not dead. The members, delegates and visitors who meet with us during the coming session will find one of the most interesting cases of resuscitation it has ever been their good for-

tune to witness and fitting it is that this should take place in New Orleans, the city of its birth.

Judging from the letters of encouragement, applications for membership and assurances of attendance that are coming from all over the South, from the editorial comment in the journals and the assurances of attendance from many prominent American Institute workers, already in the hands of the secretary, and the probability that the Executive Committee of the American Institute of Homeopathy will meet here at that time, this will be the largest and best attended meeting ever held by this association. From titles of papers already received and the contributors that have promised papers to the various chairmen, this meeting will be one of most intense interest to every live medical man of the Homeopathic school, be he located north, south, east or west.

So success is already assured, but we want more than this; we want every homeopathic physician, especially in the South, who has the interest of his school at heart, to join in with us and attend this meeting, and aid us in the propaganda to spread Homeopathy all over the South and carry on the spirit of propagation commenced at the last meeting of the American Institute of Homeopathy.

To you of the North who are interested and willing to join in and aid us in this work, we extend a hearty welcome; we need you one and all. In recent years the sessions have only been two days, but the work promised for this session is so voluminous and important that it has become necessary to provide for a session of three days, which will be February 24th, 25th and 26th. This will give all visitors a chance to see and enjoy the Carnival festivities before the meeting convenes.

It is to be remembered that those who are limited to a few days should arrive here not later than February 23rd, Mardi Gras Day; those having more time, as much earlier as they desire.

Monday, February 22nd, at 2:00 p. m., King Rex will arrive at the foot of Canal street and the keys of the city will be turned over to him; at 7:30 p. m. Proteus and his crew will appear on the streets. Tuesday, February 23rd, Mardi Gras Day,

at high noon, King Rex parades the streets, and last but not least comes the Pageant of Comus at 7:30 p. m.

TRANSPORTATION.

Cheap Mardi Gras rates can be secured from all sections, both north and south. The exact fare can be obtained by members, delegates and visitors at their home stations. Dates of sale will differ in the territory of the various passenger associations. All tickets will be good to arrive in New Orleans on or before February 23rd, return tickets will be good up to and including March 1, 1909, with the privilege of an extension up to and including March 13th if the ticket is deposited by the original purchaser with Mr. James Richardson, special agent, not later than March 1, 1909, upon the payment of a fee of \$1, to be paid at the time of deposit.

HOTELS.

The St. Charles hotel will be the official headquarters during the session. Special rates have been secured. However, on account of the crush at Carnival season, all those expecting to attend the session should make advance reservations, through the secretary, No. 718 Macheea building, New Orleans, La., to be sure of securing accommodations. The earlier the reservations are made, the better.

V. H. HALLMAN, M. D., President, *Hot Springs, Ark.*

EDWARD HARPER, M. D., Secretary, *New Orleans, La.*

* * *

THE CRITIQUE, Denver, Colo.: Thinking you might be interested in a personal item of news, I take the liberty of giving you the following concerning myself:

After a sojourn in Buffalo of twenty-two years, I am about to remove to Boston, Mass., where I am to be associated with Dr. Nathaniel W. Emerson of that city. Together we will conduct the "Emerson Hospital," enlarging the present capacity of forty beds to one of sixty or more beds, making it a very complete surgical hospital.

Dr. Emerson, as is well known, stands in the front rank of Boston surgeons and has an enviable reputation throughout New England. He has been conducting his private hospital some four years and I have been conducting mine about eighteen

years. Last spring I started out to build a new hospital, had my lot purchased, plans drawn and estimates in, when I wrote Dr. Emerson, asking his opinion of certain points in the plans. Out of that correspondence grew a proposition from Dr. Emerson, that I come to Boston and together we carry out our ideals of doing surgical work in a hospital, such as we felt able to create and maintain, by virtue of our years of experience in conducting individual institutions.

While we appreciate the dangers of "medical partnerships" yet we feel convinced that where men are temperamentally fitted to work together, are of sufficiently large caliber and free from petty jealousies, there can be no more ideal way of working than for such men to combine and jointly bear the burdens of a large surgical practice. The Mayos have been a great object lesson in demonstrating what two men can do by working together as "one man." By their joint work, one man is always on duty, yet both have the freedom for long vacations, frequent travel for study and all the opportunities for the enrichment of their skill and the refreshing of the mind and body. It is simply a merging of hospital interests and the working together of two men whose ideals are similar and who for years have been working along similar lines.

I have also received an appointment as Dr. Emerson's associate to the chair of Gynecology on the faculty of the Boston University. I expect to remove to Boston on or about January 1, 1909.

I cannot, at this writing, name my successor in Buffalo, but I hope I shall find the right man who will carry on the good work in this city.

I have been surgeon to the Buffalo Homeopathic Hospital for eighteen years and gynecological surgeon to the Erie County Hospital since its formation; founded, and conducted the Lexington Heights Hospital for eighteen years. Am an ex-president of the N. Y. State Homeopathic Medical Society, ex-president of the Western New York Society, and ex-president of the American Surgical and Gynecological Society of the American Institute.

Yours very truly,

DEWITT G. WILCOX.

Buffalo, N. Y., Nov. 1, 1908.

S E L E C T E D

PHILOSOPHY OF HOMEOPATHY.*

PART III.

(ERRATUM.—We regret very much the error which occurred on page 414 of December issue. Beginning at second paragraph, should read: "After a lapse of more than a century, the pathogenesis of belladonna as ascertained by the pure experiments and keen perceptive powers of our Hahnemann, is its pathogenesis today, and will continue to be until the trumpet sounds.")

OUR THIRD prerequisite to successful prescribing, according to the philosophy of Homeopathy, is the *single remedy*. The first prerequisite, to which your attention has been invited, that of testing each individual drug on the healthy human subject, precludes the use of more than one medicine at the same time when prescribing for the sick, unless the additional drugs forming a compound were tested on the healthy in the *identical compound form* in which it is proposed to prescribe them. The reason for this is not based on mere arbitrary objections, but a scientific truth, viz., that no two medicines when tested together, can possibly be equivalent to the sum of their pathogeneses when tested separately. To illustrate: we have tested the flowers of Sulphur and the Carbonate of lime together under the name of Hepar Sulphuris Calcareum. The pathogenesis of this combination is not identical with that of Sulphur, nor that of Calcarea carb., nor the *sum* of the two. Nor can we, in case we find an image of sickness similar to the proving of Hepar Sulphur, cure the patient by putting Sulphur and Calcarea carb. into one glass, nor by administering them in rapid alternation. Each individual patient has a personal individuality. Each individual drug has a distinct individuality; and two or more drugs cannot have *one* individuality and thus become *one medicine* and the similimum for a given sickness, *unless potentized together*. No two medicines can become *one* medicine, by any other process known to man. Each possesses a drug spirit pe-

*Read before the International Hahnemannian Association, Chicago, July 1, 1908, by Dr. J. C. Holloway of Galesburg, Ill., and unanimously voted by the convention as the propaganda of Homeopathy the coming year.

culiar to itself, but by the process of dynamization these become fused and constitute one spirit, as it were, is a new creation with new possibilities, and its curative principle is new and distinct, which is to be revealed, like that of any individual drug, by testing it on healthy human subjects.

The fathers in Homeopathy, such as Hahnemann, Boenighausen, Hering, Lippe, Wells, Dunham and a host of others, by their fidelity to the science, succeeded in handing to us the blazing torch, which in turn has been taken up by Allen, Kent, Nash and an army of co-workers who are determined, come what will, to perpetuate pure Homeopathy for future generations.

I wish to say a word in this connection concerning "combination tablets." Of all deceptions practiced in the guise of Homeopathy this is the worst! The day was when combination doctors would call for from two to six tumblers; but the practice became so obnoxious because of its manifest odious departure from the Hahnemannian standard that they devised the scheme of putting the two to six different medicines in one tablet. This would deceive the very elect themselves! And the shame of it is that some of these so-called homeopathic pharmacists who manufacture and sell this article, thus making a solemn mockery of all that Hahnemann has written, send out literature in which an effort is made to defend the abomination on Homeopathic grounds. In answer to all such *twaddle*, which never can be elevated to the dignity of argument, I quote the following from Hahnemann: "It is not conceivable how the slightest dubiety could exist as to whether it was more consistent with nature and more rational to prescribe a single, well known medicine at one time in a disease, or a mixture of several differently-acting drugs. As the true physician finds in simple medicines administered *singly* and *uncombined*, all that he can possibly desire (artificial disease forces which are able by homeopathic power completely to overpower, extinguish and permanently cure natural diseases), he will, mindful of the wise maxim that "it is wrong to attempt to employ complex means when simple means suffice," never think of giving as a remedy any but a *single, simple medicinal substance.*" This is why he laid down the following imperative rule for all true Homeopaths: "In no

case is it requisite to administer more than *one single, simple medicinal substance at one time.*" Let this be a finality, then, regarding the single remedy, with all who believe in the homeopathic philosophy. True, few who buy these "green goods" know how to find the simillimum in any given case, but this is no justifying cloak, for they, like others, can learn. No, they prefer to have the "specific," like their traditional brethren, whose fellowship they court, made ready to hand, directions and all. This bottle is for "Cough"; this for "Amenorrhoea"; this for "Rheumatism" and that is for "Worms"! And such are the products of "Homeopathic" pharmacies! And the professional dupes who buy and deal them out to their lay dupes are "Homeopathic" physicians! What a travesty on Hahnemannian Homeopathy! Let them charge me with extortion, if they will; let them aver that my medicines are as worthless as they are harmless; let them even call me "*Doc,*" but let no man call in question *the purity of my practice as measured by the Hahnemannian standard!* Perhaps we ought to say, in all kindness, to those who, because of the peculiar kind of preceptors and college faculties which brought them into professional existence do not know, that the only *specific* possible is the medicine whose pathogenesis is *similar* to the image of individual sickness found in the patient to be cured; and the combined wisdom of the universe cannot indicate by the label in what case a medicine is specific before the *patient* is seen; for a medicine must be a specific for the *patient*, and not the disease. Our most charitable view of the combination doctor would be to suggest that he has never caught the true spirit of Homeopathy; but when he knows that a combination has never been tested on the healthy *as such*, and that its pathogenesis is therefore unknown, he is *not honest* when he palms himself off as a Homeopath and thus leads his patrons to believe that he prescribes according to the law of similars. Not only does Homeopathy have to stand the odium of his slovenly methods and haphazard results, but he thus becomes a waiter on Providence and tells laymen that Homeopathy has so modified the Old School since Hahnemann's day that really there is not much difference after all! And in borrowed plumes he talks about "quackery!" but never seems to surmise

or even dream of what a decoy-duck the "regulars" are making of him! On the other hand, the men who have earned for themselves distinction as accurate and successful prescribers, and who have contributed their mite toward preserving inviolate the fundamental principles of the homeopathic philosophy, have universally sanctioned and confirmed the teaching of the master. So the philosophy of Homeopathy demands, in the very nature of things, the *single remedy*. The rapid alternation of remedies, or the administering of two or more drugs at one time which have never been potentized together and *thus* tested on the healthy, is incompatible with the theory of a true Homeopathic prescription; but when one medicine has been chosen according to the law of similars, and that remedy is allowed to exhaust its action *alone*, and a collection of the symptoms the patient *then* presents is recorded, and the case is prescribed for *afresh*, that is Homeopathy. But the unscientific feature of alternation, as that term is commonly understood, is seen in the fact that the second remedy is ordered *now*, to be given two hours after the first, thus assuming that one dose of the first remedy will result in such a change of symptoms as to make the image similar to the pathogenesis of the second remedy, and that, too, in precisely two hours! Not only so, but the first remedy is ordered, *now*, to be given again in two hours after the second, thus assuming that the first dose of the second remedy will have the exact effect assigned to it, viz., that of converting the image back again to the precise picture of symptoms which first existed! If the hypothesis were true, and if any physician could be so accurately prophetic, what could be gained by such a procedure? The best that can be claimed for the theory is, that at the end of four hours the patient will be just where the doctor found him; and if the alteration is continued, at the end of eight hours, like the hare, he is back again where he started!

The true Homeopath studies fidelity to the homeopathic philosophy, and earnestly endeavors to shun all these expedients which, like alternation, adjuvants and combination tablets, are borrowed from the poly-pharmacy of the old school and are *opposed* to sound doctrine and sound principle in the domain of Homeopathy.

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

THE PRESENT time is especially propitious to present our plans for the year 1909, and I take great pleasure in saying that THE CRITIQUE proposes pushing ahead—a direction usually taken by progressive publications, thereby maintaining its position in the front rank of the Homeopathic press of the country.

Dr Loos is at present engaged in the laudable task of telling the Homeopathic profession how to use the repertory. Many letters have been received since this series began, and I am glad

to say that the tone of all bears sentiment of appreciation and approval.

I am promised more from equally reliable sources—so, taking everything into consideration, I feel confident that readers of THE CRITIQUE, for the forthcoming year, will be provided with a genuine feast of Homeopathic reason, coupled with which will be a flow of free-handed editorial and news features which should permit this publication to maintain its well-merited position as a medical journal unafraid.

Drs. Kent, Gladwin, Hawks, Hutton, Loos, Holloway, Dienst, del Mas, Chesshire, Grimmer, Huffman, Newton, Fisher and Smythe, of our staff, will see to it that no un-homeopathic sentiments secure a foothold in these pages.

I wish all my readers and other patrons a prosperous and happy New Year, and promise THE CRITIQUE's best endeavors towards promoting these conditions, by giving all an adequate return for their generous co-operation. M.

* * * *

DURING THE PAST MONTH members of the medical profession in this city have been interviewed by a representative of the A. M. A., whose ostensible occupation appeared to be the securement of reliable data wherewith to make the forthcoming medical directory this society proposes issuing, something more on the order of accuracy than that possessed by many such so-called productions, and thrust upon the profession as being trustworthy.

As it is customary, and not considered at all unprofessional, for most every class of commercial solicitor to carry a "side line" of some sort, it was no particular surprise to many that the directory man should also solicit memberships for the A. M. A., nor is it at all probable that this thrifty individual permitted very many opportunities to pass, wherein such membership was not most alluringly set forth.

I understand that his success in securing applications from members of the homeopathic profession here abouts, and especially from among officers and member of the faculty of the so-called homeopathic college in Denver (the one protected by the *mother* wing of the A. I. H.), has been of such conspicuous proportions as to place it in the front rank of all other efforts in this line.

Naturally, too, there is much joy among the old-school elect.

Might it not be a wise plan for the Council of Medical Education of the A. I. H. to send a missionary into this jungle? One whose judgment would not be warped and withered by his sympathy for the A. M. A., preferred. M.



New Medical Books



REPERTORY OF THE HOMEOPATHIC MATERIA MEDICA—By J.

T. Kent, A.M., M.D., Professor of Materia Medica, Hahnemann Medical College and Hospital, Chicago. Second Revised Edition. Boericke & Tafel, New York City, Publishers. 1908.

Of all the homeopathic literature issued during the year 1908, nothing approaches the foregoing, even within hailing distance. It is the second edition of this most comprehensive and correct work, and the profession in general owes Dr. Kent a debt of gratitude which would be ill repaid were it not that a large majority of all homeopathic prescribers are becoming more and more devoted to the study of the repertory each year. There are repertories and repertoires—but this particular one is, as the *Medical Century* says: "What many other repertories fail to be—reliable."

The second edition contains many important features not contained in the first work, and nothing, perhaps, is more noticeable than the index; this gives the much overestimated practitioner an additional respite, inasmuch as each subdivision of the book may be readily located thereby. Few physicians have had training in the study of the repertory, nearly all having been obliged to fight their own battle in the mastery of such a work, alone and single-handed, inasmuch as so few of our so-called homeopathic colleges have devoted much time to such teaching.

The new edition is gotten up with a view of minimizing the labor necessary to making the study of each individual case an absolute pleasure, and the only way I can see for Homeopaths to realize the importance of this particular work is to purchase a copy.

It costs money to possess this valuable volume, but that is a mere incident in the practice of medicine. To fully appreciate the returns to be derived, one should keep a close estimate of his cash account and a careful case record showing the benefit derived by his patients from the use of one of the Kent variety.

Without question this is the most complete and the most reliable of all repertories of the homeopathic materia medica, and the physician who fails to possess one will be counted among those who are indifferent of their success and the results of their prescribing.

This is a characteristic Boericke & Tafel production, which stands for absolutely perfect mechanical work, and, to be appreciated fully, should be thoroughly studied.

M.

Miscellaneous Matter

Send Us a Personal Item Occasionally

"School boards make schools; such schools make fools!"—Columbus Medical Journal.

If your dues in the A. I. H. are not paid you will not receive a copy of the American Institute Journal. How sad!

Dr. E. W. Lazelle will review "Diseases of the Nervous System," by John Eastman Wilson, M. D., in our February issue.

"Le Medical Century est mort," is the way that journal broke the sad news to its subscribers. Touching, to say the least!

The American Institute of Homeopathy was incorporated on October 14th, 1908. This is a move which will give class to the association.

A visit to the editor from Dr. E. H. King the latter part of the last month of the old year, was a pleasant event which we are pleased to mention.

Nineteen homeopathic physicians have been appointed examiners for the Michigan State Sanatorium for Tuberculosis, located at Howell, Mich.

"Does medicine, as prescribed by the best prescribers of any school, cure or promote the cure of disease?" is the conundrum an Iowa doctor propounds in December issue of Iowa Homeopathic Journal.

A meeting was called for December 14th, the purpose of which was to inject new life into the Denver Homeopathic Club. Just which wing of the triple-cock college will be employed is somewhat uncertain.

Over in Iowa, doctors driving in the country on dark nights are quite as likely to meet up with a bear as one would expect to in Colorado. We supposed that all the wild animals were confined to the Woolly West.

The Homeopathic World, London, England, December number, reached us as soon as some of our American exchanges for the same month. Evidently The World believes in prompt publication on the date set for its issue.

We regret to learn that Dr. Lewis Pinkerton Crutcher, Kansas City, Mo., was confined to his home by sickness, the greater part of last month. Hope to hear that his happy smile has once more broken out at the same old stand.

"His Majesty the King has sent a gift of pheasants for the patients of the London Homeopathic Hospital, Great Ormond street,

Bloombury, W. C."—Homeopathic World. Even in England they stick to the name of Homeopathy. In Denver—?

* * *

Dr. James E. Gee, residing at 2700 Umatilla street, Denver, Colo., died from an overdose of morphine, Sunday, December 13th. He was an old resident of the city and at one time was supposed to be very wealthy. The poison was taken accidentally.

* * *

Read what the secretary of the Southern Homeopathic Society has to say in this issue of **The Critique** concerning the forthcoming meeting of that association, which convenes in New Orleans, La., next month. The Southern is not dead, by any means.

* * *

A nice, practical and extremely handy book is Blakiston's Visiting List for the year 1909. We have received a copy and appreciate it very much; it should be in the hands of every physician in the country. This is the fifty-eighth year of its publication.

* * *

Any one wishing to know of a most desirable office location, right in the busiest section of the city, will do well to either consult or communicate with Dr. E. H. King, corner of Arapahoe and Sixteenth streets, opposite the post office, Denver, Colorado. Homeopathic physician preferred.

* * *

Dr. P. E. Kritchbaum, Montclair, N. J., was elected president of the International Hahnemannian Association for the year 1909. Dr. R. F. Rabe was honored with the position of corresponding secretary. The next meeting of the society will be held at Pittsburg, Pa. How is it that this organization did not follow the A. I. H. to Detroit?

* * *

A Greeley, Colo., doctor, adopted a unique method for making business. He disposed of a fractious horse to one of his patients which delivered the goods by throwing its new owner and fracturing his arm. The victim, to get even with the doctor-horse-merchant, who was called in to repair the break, refused to pay for the services. The doctor, thereupon, sued.

* * *

Dr. J. C. Holloway, one of our special contributors, gave a lecture in one of the public halls of Galesburg, Ill., the purpose of which was to put the public wise to the principles of homeopathy. We are glad to say that the lecture was well attended and that much good was accomplished thereby. It is really too bad that we cannot have something of the sort in Denver.

* * *

We have been informed that the entire official staff of the College of Physicians and Surgeons of Denver, which is supposed to be a

homeopathic institution and under the protecting wing of the A. I. H., has applied for membership in the A. M. A. The next time the Council of Medical Education sends out someone to investigate conditions in this country, we would advise it to send someone to look after the investigator.

* * *

Dr. Dale M. King of **Medical Counselor** fame, wrote us some time ago advising of a proposed vacation and hunting trip. In the November issue of his most excellent journal he tells of that trip and winds up the article thusly: "So if Stevens (meaning Dr. Rollin H. Stevens), ever stops you and starts to talk in a low tone, run—run like h--l! and that is conservative advice." Why, dear Doctor King; is it possible that you failed to appreciate the outing?

* * *

The secretary of the State Board of Health of California declares that a large number of the cases of typhoid and other sporadic diseases which have prevailed in that state during the past year, were due to the consumption of oysters, clams and fish taken from the state's rivers and bays. In Denver nearly everything from whisky to tall buildings have been given as an etiological factor for this disease. If all scientific medical men are to be believed, most any old thing will cause typhoid, just so the trouble proves a good money maker.

* * *

The Critique desires to call attention of its contributors to the fact that abbreviation of name of remedies in their manuscripts, makes a great amount of unnecessary work for the editor. Our list of subscribers is made up largely of members of the laity, who are anxious to learn something of the law of **similia** and its application, but who are not sufficiently familiar with our remedies to recognize a great many, especially when over one-half of the name is omitted in the printed matter. We would, then, very respectfully urge that the names of all remedies be spelled out in full in the future.

* * *

It wasn't a Missouri editor, but a printer's devil who was going through his first experience on "making up" forms. The paper was late and the boy got the galleys mixed. The first part of the obituary notice of a pecunious citizen had been dumped in the forms and the next handful of type came off a galley describing a recent fire. It read like this: "The pall bearers lowered the body to the grave and it was consigned to the flames. There were few if any regrets, for the old wreck had been an eyesore to the town for years. Of course, there was individual loss, but that was fully covered by insurance." The widow thinks the editor wrote the obituary that way because the lamented partner of her joys and sorrows owed him five years' subscription.—**Ithaca Weekly**.

READING NOTICES

Of Interest to Everybody

WHERE THERE IS A BURNING sensation when urinating, sanmetto in teaspoonful doses three or four times a day usually gives relief. If the urine is alkaline, ammonium benzoate in connection with sanmetto will prove helpful and citrate of potash when the urine is acid.

PROPHYLACTIC PRACTICE.—Some think that the therapy of the future will be mainly preventive or prophylactic practice, and adherence to only those remedial agents that have proved particularly efficacious. Sanmetto if kept at hand, and always used upon the slightest manifestation of a threatening enlargement of the prostate gland, will prove prophylactic. It is particularly efficacious in prostatitis and in all inflammatory conditions of the genito-urinary tract.

A SUCCEDANEUM FOR MORPHIA.—We meet with many cases in practice suffering intensely from pain, where from an idiosyncrasy or some other reason it is not advisable to give morphine or opium by the mouth, or morphine hypodermically, but frequently these very cases take kindly to codeine, and when assisted by antikamnia, its action is all that could be desired.

In the nocturnal pains of syphilis, in the grinding pains which precede labor, and the uterine contractions which often lead to abortion, in tic-doloreux, brachialgia, cardialgia, gastralgia, hepatalgia, nephralgia and dysmenorrhoea, immediate relief is afforded by the use of this combination, and the relief is not merely temporary and palliative, but in very many cases curative.

Muscular spasm is often controlled by antikamnia and codeine tablets. Their action is of essentially the same character as the morphine action; the same parts of the central nervous system are affected, and in the same way as morphine, but not in the same degree. Nor do they induce habit.

In pulmonary diseases this combination is worthy of trial. It is a sedative to the respiratory centers in both acute and chronic disorders of the lungs. Cough, in the vast majority of cases, is promptly and lastingly decreased, and often entirely suppressed. In diseases of the respiratory organs, pain and cough are the symptoms which especially call for something to relieve; these tablets do the work, and in addition control the violent movements accompanying the cough, and which are so distressing.

Denver, Colorado, February 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

PERCEIVING THE PATIENT IN THE RECORD. Continued.

Julia C. Loos, M.D., H.M.

ILLUSTRATIONS: Perception of the patient in the record is of so much importance in practical work, it will not be amiss to devote more space and consideration to records made in actual practice, from which the prescriptions have been made and proved effective. If the readers of this series, desire to have their own records used as illustrations in determining the important symptoms which characterize the case and sketch the image of the remedy, such records will be welcomed and used in later papers.

CASE 1:—Miss E. C., in 1903 was 22 years old, tall, large frame, plump form, with brown hair, blue eyes and rosy cheeks. Her first consultation was for neck, swollen lymphatic glands, on right side, along sternocl.-Mastoid muscle, one on left side below maxillary bone. After increasing in size, two years, such a tumor was removed by surgery, three years ago. Within a year a second one began on right side and increased to size of half inch diameter, lower, near the clavicle. This is painful in damp weather and from pressure of neck bands.

Head, dull occipital pain, from pressure on neck. Reclining occasions knotted distention of jugular vein, amel. with head high. Cracking sound in ears. Pain agg. jar of riding, amel. quiet.

Disposition fretful, dull mentally, quick tempered, scolds; weeps when tired or nervous.

Arms numb, prevented sleep until 2 a. m. some nights.

Restless; ameliorated by motion and occupation. Works rapidly, talks rapidly when nervous, stutters at times. Easily fatigued.

Inflammatory rheumatism at 12-14 years of age and four years later. Had internal treatment. All parts of body sore to touch. Began in shoulders, hips and knees. Rheumatic pains now, in damp weather, amel. continued motion, agg. on beginning motion, not noticed while quiet.

Menses at three weeks' intervals, especially when having much exercise. Backache and bearing down pain in abdomen, as if contents would drop out, first day. Flow copious, small dark red clots and dark fluid, continued three days. Began at 15 years of age. During menstruation dull, stupid, concentration difficult.

Perspiration free from exercise and in warm air. Most across back

and in axillae. Hands and feet moist and warm. Cold when not in usual health and during menses.

Warm usually; face flushed when very warm. Coryza from exposure in cold air.

Appetite, fair. Not fond of meat and eggs. Desires warm food.

Thirst, for large quantities of cold water.

Urine, muddy, gray sediment.

Sleep, good, prepared to rise early.

Ameliorated in open air: ameliorated from bathing; ameliorated in autumn.

Study of this record reveals that the head symptoms as reported, due to pressure of the glands on the blood vessels cannot be counted anything but mechanical features, not expressive of the patient. The rheumatism siege was an acute condition and its modalities may not apply now. The return of rheumatic pains in damp weather, however, reveals the influence of wet weather on the system. *Agg. in wet weather* is characteristic of this patient. The remedy which will most closely resemble the case must have in its nature *Swelling of cervical glands*. Mentally, she is *Agg. during menses* and that is herself. She is most comfortable out doors hence *Amel. in open air* characterizes the patient. The menstrual function is of the organism and here *Menses are too frequent*. Perspiration is an accompaniment of all exercise and is constant on *palms of hands and on feet* hence *Perspiration from slight exercise* and Perspiration of these parts (under EXTREMITIES) being abnormal reveal the nature of disorder effects. *Weeping* is a mental symptom but is so large in its list of remedies that it is used after elimination has been carried out, to save extra work. *Thirst for large quantities*, though revealed through the stomach, is expressive of the demands of the system and is included as characteristic.

The production of an anamnesis with these rubries and their accompanying remedies emphasises the similarity of a small group of remedies with the same number of symptoms from the group, but in differing degrees. The strongest representation is in favor of SULPHUR. Recapitulation of the record, with these few remedies in mind or close comparison of their various natures and the history as given, leads to the use of the great anti-psoric to start the work of reconstruction. Under its influence, in actual experience, the patient improved in every phase

mentioned and the glands returned to their proper size without similar enlargement in others which all told a better influence than surgery achieved.

* * *

CASE II:—Mrs. F. J. delivered herself of her first child which presented by a foot and was dead when delivered. The mother had considered herself in good health all during the pregnancy but her color was one evidence of disorder within. In the following spring she reported cessation of menstruation, with slight pain in abdomen and sensation as if menses would appear and leucorrhœa resembling white of egg, bearing down pain when tired.

Headache, frontal, sensation of fullness or congestion for ten days.

Diarrhoea, for a week, three or four evacuations in forenoons; evacuations brown, mushy, without flatulence or pain; had typhoid fever at 17 years of age. Skin not clear since then.

Tires easily, not so strong as used to be.

Fell on ice six weeks ago, striking end of back.

Heat, flashes; tongue coated; mouth, offensive taste in mornings.

No other symptoms were available, with strongest efforts of investigation. Careful inspection selects the following symptoms as most expressive of the patient and characteristic in this case, supposing the woman to be pregnant: *Leucorrhœa in place of menses*. *As if menses would appear* (when there appeared reason to suppose it would not) *Diarrhoea in forenoon*; *Diarrhoea painless*; *Head fullness in forehead*; *Leucorrhœa transparent*; *Face sallow*.

Using these rubrics for repertory study brings four remedies prominently before us: Nat. mur., kali carb., apis, mag. c., with nat. mur. most similar. Thus, even in an indefinite expression, where one might say no definite symptoms are marked, there may be found enough to make a prescription, which when administered will arouse the economy to action, as resulted from the use of nat. mur. in this case. Although the diarrhoea continued for some time, in modified forms, the patient herself became more active and the skin cleared very perceptibly and it was very evident that reaction had occurred.

In closing this contribution, I would suggest that students of repertory work should search out the rubrics in the cases cited and proceed as in an original study of the cases, to work out the remedies and compare the remedies and the records, more thoroughly.

Harrisburg, Pennsylvania.

POWER OF DEVELOPMENT AND CURE IN LIVING CREATURES.*

Julia C. Loos, M. D., H. M.

DEVELOPMENT includes the unfolding changes from the form of ovum to that of maturity, i. e. the most complete growth, possible.

Cure is the restoration from a disorderly to an orderly activity. The thing disordered is cured, not the disorder. The disorder is removed in the process of cure.

Physiological Development.

The material beginning of all living creatures is the cell or egg-form, in both animal and vegetable kingdoms. It is the life business of all cells to reproduce themselves by functioning, i. e. by building their own substance from the air, water and nutritive serum of their own, whereby they develop a characteristic product or juice. All cell multiplication begins with changes in the nucleus of the germ or egg-yolk. This nucleus draws from the surrounding protoplasm, its nutrient substance, returning the resultant substance of its own activity. The germ or yolk, in turn, depends upon the surrounding serum, the air and the water, rejecting whatever is not so suited to its needs. In the simplest living forms, one cell forms the individual. This protoplasm possesses the properties of sensation, respiration, contractility, nutrition and reproduction, by division, under the influence of proper light and heat.

In the egg-forms, fecundation by a different cell form is necessary for reproduction and in the development, under proper light and heat stimulus, a differentiation of cell production occurs and results in the complex, co-ordinated organism with bone, muscle, skin, nerve, etc. Each form of cell contributes its characteristic product for the benefit of the organism, but selects that which forms its own special kind of cell, muscle from muscle, liver, from liver cells, kidney, from kidney cells, etc. In the higher forms of animals, the ovum developing within the parent body, the nutrient supply is carried in the blood stream of the mother and dependent on her vital processes.

In the highly organized forms of animal and vegetable, special organs assume the functions of respiration, sensation, mo-

*Read before the Hahnemann Round Table of Philadelphia, Pa.

tion, nutrition and reproduction for the organism, although each cell continues to perform these functions for its own reproduction. All the functions of the organism are co-ordinated by the central nervous system. Then the cells and cell groups receive the stimulus not only of light and heat, but this influence from within the organism, distributed through the nervous system to all parts. This is the vital control, from within outward, without which activity in the cells of the organism would cease and the organism, in consequence would perish. In the higher animal forms, the supervising brain includes definite localized areas in control of special portions of the body. Substations for various localities and organs are located in spinal ganglia and other plexuses in charge of their special provinces. Through this nervous system, itself composed of special nerve cell elements, uniting all parts of the body in communication, cell activity everywhere is modified.

Other stimuli exert modifying influences on the cell activity increasing or decreasing the functioning of the cells and cell structures and the activity of the organism. Among these are electricity, temperature changes, and contact of foreign bodies; touch and pressure. Mechanical injury acts as a stimulus, the cell proliferation repairing the injury with the increased activity. The mechanical force may be sufficiently strong to overcome the vital control, decreasing the activity, even to the degree of its destruction and death of the part or of the organism. Concentration of the energies acts as a stimulus as illustrated in the highly developed plant blooms when the bloom producing power is forced to a limited number of stems.

In the most highly organized animals the human animal with added gray brain substance and increased convolutions for the seat of the higher mental faculties, the mental faculties become powerful stimuli to the bodily activities. Perhaps the complete power of the mental faculties on cell development and activity has not been most completely demonstrated. This operates through the gray, the white brain substance, the ganglia plexuses and nerves to all parts of the body.

Mental Hygiene.

Man is created in the image of his Creator with the attributes of love and wisdom "freely employing the living, healthy,

instrument (the body) for the higher purposes of our existence," as Hahnemann expresses it. In addition to the localization of areas in the brain for body control, there is also localization of the organs of mental faculties. In these as elsewhere, functional activity and cell multiplication and reproduction occur simultaneously. That the tenant, the man within the body expresses himself through and in the body and its functions is evidenced by the characterizations which are sketched by the phrenologist, the physiognomist, the hand reader and the manuscript graphologist.

The close relation of mental operations and physical conditions is pictured in innumerable instances. Grief, worry, anger, jealousy, disappointment; the unpleasant emotions, depress the functions, retard cellular functional activity. Happiness, love, content, the pleasurable emotions, exert a stimulus resembling that of sunshine. Mental exertion is frequently followed by physical fatigue. Intense desire to a special accomplishment serves as strong stimulus to even over-wrought functions. It is called enduring will power. The commonest example of mental stimulus is the usual control of the body by thought.

A. Victor Segno, in his "Law of Mentalism" emphasizes the power of mental concentration upon the functions of the body and its development. As in plants, concentration of vital influences results in blooms of increased beauty and quality, so is development stimulated in the human being by concentration of mental control.

The developing influence, from within, out is illustrated in some experiments with athletes. A group of men was divided into two sets. One class practiced as usual, the running, jumping and other exercises for muscular training while the other class without the active muscular activity, systematically stimulated the muscles by thinking the exercises. The result of the final contest demonstrated the active power and endurance of the mental athletes to be almost as much as those in active training.

In feeble minded children, directed manual training concentrates their attention on certain definite actions and not only trains their hands but develops functional brain cell multiplication. Similar evidence is expressed in the success gained by train-

ing singers and elocutionists by concentration of mental power for free expression, even thinking the practice exercises without vocal audible action. The artist who said he mixed his paints "with brains, sir," uttered the keynote of achievement in all departments of science and art, notably those of personal development.

Doctor Landone, in the Institute of Applied Science and Art, in Los Angeles is setting into operation the cream of all these observations of the control of the organism and its cell activities through the mental realm. By supplying the natural stimuli in environment and desire, carefully directed training is developing the deficient functions in those of stunted growth and affording the ambitious the freest expression of their talents and unfolding of inherent possibilities.

We have learned that the grade or quality of any individual offspring is determined by the grade or quality of the parents *at the time they contributed to its development.* We have noted that the nutritive substance of the foetus is carried to it through the blood stream of the mother and is modified by the influences of her life. The influences, aforementioned, which modify the functional activity in her body, are also effective in forming the new creatures dependent upon her tissues. Its cell formation is stimulated or checked by the influences of her life, acting from within, out.

We are interested in one other form of influence on the organism, viz., the effect of animal, vegetable and mineral substances, classed as drugs. Each drug substance, manifesting any modifying power upon the organism is observed in its very definite expression in the functions from deep within the economy. The effect in each instance, upon selected tissues or organs, whether depressing or stimulating the organic functions, is transmitted by the path of control from within, out.

Power of Cure.

From these facts of development; that it is the continued reconstruction from nutritive supply, regulated by modifying influences of stimulation or interference, let us turn attention to the interferences. The influence operating the functions, the cell

multiplication, from within, out, co-ordinating all the processes of the organism in harmonious action, is the *strongest influence in cell production*. It is even superior in importance to the supply of nutrition though the nutritive elements of the circulating medium, the air and the water are necessary for reconstruction.

When derangement occurs, therefore, what more rational explanation is to be offered, than that presented by Hahnemann; that it is the internal vital influence that is primarily deranged, expressing its derangement in disorderly control which results in failure of the cells' normal activity and their final destruction.

Anything which is capable of restoring orderly co-ordination and harmonious action in the organism is curative in its influence, resulting in continued restoration of cell functioning to maintain the integrity of the body. This fundamental conception must precede all attempts at therapeutic measures, with or without drugs. The supremacy of internal control cannot be ignored. Any method which antagonizes that force must necessarily fail. We have observed, too often to doubt it, the harmonious action of remedies selected on the homeopathic law, based on this conception of the deranged organism. When inflammations, septic fevers, distressing susceptibilities, pathologic anatomical changes disappear under the administration and influence of our remedies, we cannot doubt the nature of the influence as the entire organism proceeds in orderly action.

Many substitutes for the homeopathic remedy have been suggested. With the realization that cell multiplication depends on the presence of suitable food supply, much emphasis has been placed by some would-be healers, on forcing food-stuffs, air and water upon the individual irrespective of desire and taste. Others have concluded that errors of diet are responsible for existing ills. Others have devoted attention to concentrating the blood supply upon the affected tissues to afford more nutrition and removal of waste. This is accomplished by pressure exerted upon the blood-vessels to retain the blood longer in contact; the Diefenbach Hyperaemia method. Hydropathic methods aim to regulate the blood supply in the affected tissues, to furnish nutrition or relieve irritation. The mechano-therapy method aims to stimulate or depress the nerve stimuli, through mechanical force upon

the spinal plexuses and ganglia, thereby affecting the cell activity and blood supply to any affected area of cells.

These measures must all be recognized as more or less local, palliative of local conditions, disregarding the internal disorder which tends to permit or continue the local manifestations. Hahnemann demonstrated the development of disorder, having originated in habits of life, contrary to or in discord with, the laws of the universe and normal life. The susceptibility to other disturbing influences, thereby developed, is the basis of physical disorders. Treatment of expressions of disorder as though they were merely local, the treatment being antagonistic to the controlling force, has resulted in repeated suppressions through many generations until the present complicated forms of disorder are present in the majority of people. Cure must be from within out and is expressed in the disappearance of symptoms from within out and hence in the reverse order of their appearance.

Obstacles.

We have observed that our remedies do not act freely and the usual curative evidences do not appear, in those whose lives are in mental discord. Where domestic relations are antagonistic, where individual desires and occupations are at war, where the environment entails continual mental antagonism, the normal functions of the organism experience interference. These things are in line with the beginnings of physical disorder. All disorders which are *dependent* upon recent discords of this sort will be relieved and discontinued through restoration of normal activities; return to mental hygienic living. Recent demonstrations of mental influence in correcting disturbed functions are in line with observed power of mental concentration in development.

When the disorders are less recent and dependent on the deeper basis, our remedies will not act in the presence of such continued mental discords. Naturally the best conditions for restoring order in the physical condition of man is in the atmosphere of life in accord with nature's laws. Restore the harmonious relation of life to the universal laws, direct the mental power into channels of mental hygiene, that our remedies may have free

play. Many disorders are found to depend on these recent disturbances and freed of them, harmony in co-ordination prevails. When order is finally restored, the body will again be "ruled with unbounded sway, retained in all its parts, in admirable, harmonious, vital operation, as regards both sensations and functions, so that our reason-gifted mind can freely employ it for the higher purposes of our existence."

As physicians, assuming to cure the ills which are the result of discordant life and suppressed manifestations, we must recognize the obstacles to the action of our drugs from within out. We must recognize the influence of mental discord, influence from within, out, and just as clearly the influence of mental harmony or mental hygiene, from within, out. We must require obedience to and be prepared to direct obedience to hygienic laws physical and also mental. Failing to recognize these things, we repeatedly administer remedies of potentized drugs, without benefit and even with complications due to the potencies, in the sensitive organisms. The image becomes more and more confused and we none the less confused, unless we can trace influences to their source.

To sum it all in concise form, we must perceive that development and cure are the result of stimulating influences to the multiplication of cells from proper nutritive substances, these stimuli act from within, out, through the distributing system of the organism and never affect changes from without inward. In any individual case we must perceive whether it is the quality or quantity of nutritive supply, or the nature and quality of stimuli that is at fault. If the latter we must further perceive what the disturbing stimulation is before attempting to remove its influence. We must be prepared to remove the exciting causes and the obstructing occasions to cure, be they material foreign bodies, unhygienic physical habits or unhygienic mental habits. The man himself is sick, in disorder, before his body expresses such a condition. To restore him and his body to order we must look beyond the expressions and direct our measures to the man himself.

Harrisburg, Pa.

SPECIAL ARTICLE

THE CARE OF THE CHILD.

By E. G. Whinna, M. D., Medical Inspector of Schools, Philadelphia, Pa.

HOW CAN we judge of a civilization, and is there any standard by which we may gage its power and significance?

It has been claimed that the standing of woman in the community, the respect shown to her, the assurance that her rights will be protected, may be regarded as an unfailing evidence of civilized conditions. The financier is inclined to regard that nation as leading the others in the march of progress which controls the finances of the world. The engineer takes his measure of value according to the amount and efficiency of machinery used for the manufacture of goods. In the domain of transportation most is made of the proportion of railroad lines to the area, or perhaps the population of a country. So every one uses the measure to which he is accustomed in his own home, his trade, or his own vocation, and even the soap manufacturer gages the civilization of a people according to the consumption of soap. But if we attribute to the parent the sentiment that the rank of a community in the scale of progress should range according to the significance ascribed to the education of children, we would perhaps have an indicator that comes nearest to the real criterion of true culture.

The entrance of a child into school life marks sharply his passing out from baby-hood with its tender, constant care. It is the first flight from the home nest, the first stroke to sever the cable making the child dependent on his parents, which strand by strand is cut until he becomes an independent being, capable of caring for himself.

Many a mother feels the wrench of this passing of her child to the training and teaching of others, and while her heart is full of solicitude, like the mother bird in the forest tree, yet instinct tells her, too, that the first flight must come. Though there are tears in her eyes, she resolutely leaves her child in the busy school room, where the little face, the center of the home life, is lost in the mass of other eager childish faces, each as precious to some

other mother as her own to her. While the mother is apt to sentimentalize over the stepping of the little one from her arms, she instinctively readjusts herself more or less quickly, and soon her transient grief is lost in pride in his improvement. With the child however, this passing into school life is not so quickly over. He may start out proudly important and self reliant, or he may go shyly, timidly, fearfully, but the harness of training galls the little shoulders, even if it be adjusted ever so loosely.

It is hard to be one of many instead of *the one*. It is trying to wait one's turn for help or encouragement. There is much a mother can do to help her children through this transition period. The first thing mothers should see to is the physical state of the child. It is not enough that he should be *thought* well. He should be daily watched to see that he keeps well. If there is a flagging appetite or evidences of physical disorder, it should never be passed over lightly. The disturbance should be looked into thoroughly, but without fussiness, and if possible the cause removed. More than half the diseases of childhood are caused by "taking cold."

There is probably no question concerning which the watchful mother is more curious than whether or not there is any contagious disease prevalent in the neighborhood.

Every physician is familiar with the query. "Have you any cases of fever, doctor?" or, "Is there any epidemic in the neighborhood?" which is usually followed by the explanatory remark, "You know none of our children have had the measles," or "Only Bertie has had scarlet-fever, though they have all had the whooping cough." The question is significant. The thought in the anxious mother's mind is to keep Bertie and his brothers or sisters as far as possible from the infection, or more correctly to keep infection as far as possible from them. While this is true of most parents, it is not universally so, for the argument is frequently heard, "Oh the measles that are 'going' are of a mild type, it is just as well the children should take them now and have it over," and I have even known them to go so far as to take their well children to houses where measles existed, and place them in the same bed with the child suffering from measles.

Jenner tells us that the same thing was common in his day when parents intentionally exposed their children to small pox under the idea that they would have it sometime, and that it was

just as convenient to have it then as later. In this matter of children's diseases, it is a good practice which aims at putting the evil days as far off as possible, and this for several reasons:

First of all, the character and severity of the attack cannot be fore-known. Slight and apparently insignificant cases of scarlet fever may be followed by the most malignant. The mildest cases of measles may develop severe and fatal broncho-pneumonia. One child may have whooping cough with paroxysms so few and slight that there may be a doubt as to the correctness of the diagnosis, but may then communicate the disease to another child, who has it in greatest intensity. Apparently simple cases of tonsilitis and "sore throat" may propagate the formidable diphtheria.

In the second place, in all these contagious diseases, the danger to life is in inverse ratio to the age of the child. The younger it is, the more, likely it is to succumb. As for instance, in whooping cough, 40 per cent. of the mortality is in children under one year of age, 30 per cent. during the second year of life, 15 per cent in the third, 6 per cent. in the fourth, and only 9 per cent. in all the subsequent years of life.

In measles the same rule holds good, and after the fifth year the proportion of deaths to cases is enormously diminished.

In shielding a child against the infection of scarlet fever, two things are positively gained. Every year of escape renders him less susceptible to the disease. To be sure even adults do take the disease, but the probability of an adult taking this or any other of these infectious diseases is infinitesimal.

Secondly, even if the child does take the disease ultimately, every year that the attack is deferred, reduces the danger which it brings; in other words, attacks of scarlet fever become less frequent and less severe with every year of age after the fifth.

The same is true with almost equal force of every other infectious disease of childhood.

Coming now to the practical point as to how the child may be shielded from infection, it is evident that the most important consideration is the isolation of those already ill, and who, therefore are capable of conveying infection to the healthy. Whenever a child shows signs of fever, he should be separated from the other children until such time as it can be determined that the disease is not a contagious one. This is the more important if it is known that, one of the contagious diseases is prevalent in the neighborhood, but it is a safe rule to follow at all times during

that preliminary period, where languor, feverishness, and mental perturbation give evidence of trouble at hand.

There is another very important means of shielding the child from contagious diseases:

There are in the blood innumerable microscopic organisms whose function it is to wage war upon the germs of contagious diseases that find entrance into the body. The activity and potency of these organisms depend upon the general vitality of the body. The ways and means necessary to keep these defenders of the system in the best possible condition to do battle with the greatest chance of success, are those calculated to improve the general health; plenty of sunshine, fresh air and out of door exercise, warm and suitable clothing, a proper quantity of wholesome food, and general attendance to the functions of the skin and excretory organs.

This method of preserving children from scarlet fever, measles and kindred ills, has the merit of being common sense and rational and should be especially practiced at such times as contagion abounds.

Just as I was finishing up this paper, I ran across a little poem and scratched off a copy of it to read to you. A child is represented as speaking to its father and mother in a sort of dream, as if lying sick, and probably about to die, and so the child says:

If I should die tonight,
Father would look upon my quiet face
Before they laid it in its resting-place,
And deem that Death had left it very fair,
And lay snow-white flowers against my hair,
Would smooth it down with tearful tenderness,
And fold my hands with lingering caress,
Poor hands, so empty and so cold tonight!

If I should die tonight,
Mother would call to mind with loving thought,
Some kindly deed the little hands had wrought,
Some gentle word the frozen lips had said,
Errands on which the willing feet had sped,
The memory of my selfishness and pride,
My hasty words would all be put aside,
And so I would be mourned and loved tonight.

Oh! Father, Mother, the child voice cries tonight,
Tenderly lead me in the narrow way,
Now my faltering footsteps are prone to stray,
Keep not your kisses for my dead, cold brow,
Teach me and guide me, and pray for me now.
For care neglected, for sweetest love I plead!
When Paradise is mine, I shall not need
The Christ-taught tenderness for which I pray!

Read before Parents' and Teachers' Association.

S E L E C T E D

PHILOSOPHY OF HOMEOPATHY.—PART IV.

By J. C. Holloway, M. D.

THE FOURTH and last prerequisite which we shall mention is : *The minimum dose.* That remedies prescribed according to the Homeopathic law *must* be given in very small doses, is a truth now well recognized. But some, still adhering to old school traditions, insist upon using those dilutions which still contain some of the material substance, while those who would tread in the foot-steps of Hahnemann want none of the material drug, but the drug-spirit *only*. After an animated disputation covering a period of more than one hundred years there seems to be as much hostility against the infinitesimal dose as in the beginning. There is still a wonderful tendency, on the part of many, including some doctors, to want *nasty* medicine. And here I want to register my unalterable protest against crude medicines as the common and prevalent curse of the civilized world. There are more people suffering today from the effects of strong and obnoxious drugs than from natural causes. The vast army of incurable *drug fiends* in the world today, as the legitimate and necessary product of the Old School practice, is a standing monument of shame which betrays their want of science and co-operation with Nature. As in the days of Hahnemann so it is now; the vast majority are on the side of crude medicines, or potencies so low that the material elements can be detected. And so will the status of this question ever continue, so long as men look upon disease, disease causes and the curative power in medicine, as things *material*. Materialistic conceptions have heaped more infamy on Homeopathy and blighted the otherwise brilliant prospects of more medical students, having changed their course from the goal of pure Homeopathy to that of the flesh-pots of Allopathy, thus making of them *mongrels* instead of Homeopaths,

than all other causes combined. They are then in line for public sanction of the microbe theory as disease cause, and ready to send in their application for Allopathic affiliation, blandly agreeing over their own signatures to be known simply as "doctors." Well, be it so. But for one, I would rather be in the minority on the side of *truth*, with the consciousness that I have the means of curing any patient who is curable, and enjoy the distinction of living and dying a consistent, loyal follower of the greatest physician the world has ever known, than to be identified with those who in their hearts have no confidence in medicine, no accurate conceptions of disease and no law of cure, even if their majority ranked with that which opposed Noah.

No materialist can ever hope to be a successful Homeopath until he divests himself wholly and completely of his materialism. The power of drugs to cure does not decrease in the ratio that their material substance is diminished, but rather just the converse. And this our master announced in the most positive terms; and this men *must* learn before they can expect to practice Homeopathy successfully. No amount of figuring, and no phase of true philosophy can make the *material* dose the *minimum* dose. Hahnemann said: "The smallest possible dose," and this he gauged by the following rule: "The doses of all Homeopathic medicines, *without exception*, are to be reduced to such an extent that, after their ingestion, they shall excite a *scarcely observable Homeopathic aggravation*." This Homeopathic aggravation is an evidence that the appropriate medicine has been selected; the fact that it was *scarcely* observable, is proof that the medicine was not too low; and the fact that it was observable *at all*, is undeniable proof that it was not too high. So this concise and comprehensive rule left us in the last edition of the Organon, draws the line and strikes rock bottom so far as the Homeopathic dose is concerned. Why will men not accept it, especially those who pretend to be Homeopaths? I answer, because of the *materi-alism*. There is one lesson which they should learn well, viz: *that no man can give the wrong medicine crude enough, or in doses large enough, to cure*. The therapeutic law comes first,

that the right remedy may be chosen; and then the philosophy of dynamization, that the medicine may be more penetrating and cure with none, or but a slight preponderance of its own symptoms.

There is a sentiment entertained by some otherwise pretty good Homeopaths, to the effect that one can be loyal to the principles of Homeopathy and maintain his true fidelity to the teachings of Hahnemann, while prescribing tinctures. This I deny cutright and without apology, for four reasons: (1) The crudity of a tincture is not a similar to the spirit-like vital force; (2) The smallest doses of the tincture is not "The smallest possible dose," of that medicine, as Hahnemann directed; (3) as a rule tinctures offend the taste, the very thing which Hahnemann says the suitable medicine in the Homeopathic system *never* does; and (4) the great teacher and founder says, when speaking of injuries the whole living organism always requires "active dynamic acid to put it in a position to accomplish the work of healing," and further says that "when the external pain of scalded or burnt parts needs to be homeopathically subdued, then the services of the dynamic physician and his helpful homeopathy come into requisition." Just imagine Hahnemann calling a prescriber of tinctures a "dynamic physician!" There would be just as much philosophy in calling a so-called "regular" a dynamic physician. The term "dynamic" literally signifies power; but as Hahnemann used it it means "spirit-like power;" that power of drugs which is hidden in their inner nature, but unfolded and developed by dynamization.

Here I want to express my honest conviction that no man can ever amount to much as a Homeopathic prescriber; never reach the eminence in which his work, his marvelous and brilliant cures will rank him with such men as Boeninghausen, Herring and Dunhan, until he completely rids himself of this materialism, and in its stead imbibes a full, clear, deep, appreciation of the "spirit-like" power of drugs. This inevitable bar to success will, ipso facto, shut off the brilliant light which would otherwise illuminate his Homeopathic career.

Most anybody can become a materialistic doctor, but it calls for a higher conception of Homeopathy; for keener perceptive powers, and a deeper delving into the very gist and essence of that which Hahnemann taught in order to become what he termed a "dynamic physician," and in order that his services may be in deed and in truth "helpful homeopathy." Homeopathy, in order to be really helpful, must be *pure*. It is based on "easily comprehensible principles;" and there is no justifying excuse for rank and bold departures under any circumstances whatsoever. It is the drug-spirit acting on the spirit like vital force which gives the cure the qualifications of rapid, gentle and permanent. No old school serum can effect a cure with these qualifications, if at all. No amount of the indicated remedy can kill, if prepared according to Hahnemann's final instructions, viz: capable of producing only the "very slightest homeopathic aggregation." This is not true of any old school serum, and until they make it true, we need not entertain the least fear that they will lay down the fence and enter the Homeopathic field from the rear. The doctrine of dynamization has always been the impassable gulf between the two schools, and those arrayed against this doctrine, whatever their pretensions, should answer to the roll call on the enemies' side. I submit that the doctrine of dynamization which supplies us with the drug spirit absolutely free from its material substance, is an indispensable, integral part of the Homeopathic system; that Hahnemann announced it as a part of his system and that no man has fully comprehended Homeopathy or fully equipped himself for the display of all its possibilities, who has failed to grasp this essential feature. Homeopathy will never reach its acme until the philosophy of dynamization is incorporated into the practice of all professed homeopaths and fully explained to the general public; until said practitioners quit imitating the traditional doctor by issuing disks of various colors, or large bottles of colored water, and in every other particular; and until all who would practice Homeopathy acquire the knowledge and cultivate the courage necessary to the use of a good repertory in the office and at the bed-

side. Had these things been attended to from the beginning, Homeopathy would be the prevailing system of medicine in this country today. Laymen must not be expected to understand, advocate and defend that which they have had no opportunity to learn. The only rational reason that can be assigned as to why all families of intelligence and culture do not employ Homeopathy, is the fact that they do not understand its fundamental principles and superior advantages. The claims of Homeopathic superiority must be spread before the public at large and elucidated until the people understand and accept them; and until they further understand that Allopathy, as a system of medicine, can not add one star to the glory of Homeopathy. Some practitioners expect patronage because they are physicians; others because of commercial reciprocity; but we must so conduct our campaign that patrons will choose us because we are Homeopathic physicians, and hence can give them what they can secure nowhere else in all the world. There can be no permanent gain for the Homeopathist or his system, by a policy of coddling the old school as if Homeopathy were not out of her teens. They have fought us with all the boldness, gallantry and intrepidity which they could command for more than a hundred years, and our armor is still complete and our banner unsullied; let them try another hundred! The law and maxims which have served us so well thus far, will prove equally effective for our posterity.

The closer we adhere to the letter of Hahnemann's instructions, the more successful we shall be in ameliorating the suffering, healing the diseases and prolonging the lives of those who confide in us as Homeopathic physicians. In their ignorance, indolence, or erring judgment men may fail, but the law, *never!*

(This completes Dr. Holloway's article which was selected by the I. H. A., as the propaganda of Homeopathy. **The Critique** has arranged for a continuation of this movement, and will have an article, especially prepared by Dr. Holloway, for its pages, in each issue during the year 1909.—Editor.)

EVERY DAY PRACTICE

Peculiar and Unusual Cases Wanted

THE TWO FOLLOWING CASES were sent in by Dr. James Tyler Kent, 92 State Street, Chicago, and we regret came too late for publication in our last issue. They go to show what a careful study of the repertory will do towards successful prescribing:

Case 1:—Widow, aged 38, dressmaker; short, thin; a nervous wreck, deserted by her husband. Symptoms:

Been sick fifteen years.

Weighs 112 pounds.

Case has been diagnosed by three different doctors as tumors in ovaries and their removal advised at once as only hope of saving life.

Pain in both ovaries comes and goes; aggravated before the menstrual period; dragging, bearing-down as if uterus would fall out.

Bladder pains at night and late in afternoon; burning, stinging, causing desire for frequent urination.

Headache before menstrual period.

Headache back of head and through eyeballs.

Headache better by heat.

Headache better keeping quiet and lying down.

Headache not affected by light.

Headache aggravated arising and stooping.

Sensitive to cold, must dress warm.

Sensitive to warm room, like air.

Thirstless.

Appetite good.

Sour stomach.

Desires vegetables and fruit.

Aversion to sweets.

Polypus in rectum.

Hemorrhoids.

Uterus bent forward.

Right ovary has sharp, shooting pains.

Menstrual period normal.

Last winter fingers would get blue.

Wakens at night with smothered feeling.

Nervous.

Hands perspire.

Cares little for bread.

Had *calcarea iodide*, 10m., single dose at long intervals, four doses in all and has become a robust woman, earning her living at her trade. She now weighs 140 pounds, having gained twenty-eight pounds. Has not an ache or pain.

* * *

CASE 11—Mr. X., age, 34; following is history of case:

Mother has enlarged liver; has carbuncles.

Grandfather hung himself.

Father paralyzed since attack of grippe.

Losing flesh; gains in fall and always sick in mid-winter.

Skin brown at times.

Tongue shows imprint of teeth; not badly coated.

Restless.

Lies awake and thinks of foolish business plans; makes millions.

Irritable, quarrelsome; it is a strain to look pleasant.

In the winter, running causes burning-stinging, eight inches above knee; in thigh, as if hot iron were placed on skin.

Pain under scapulae.

Much distress in bowels; a dull pain makes him so nervous he can neither read nor sit still; sometimes this extends to end of penis, then end of penis becomes cold.

Numbness in finger tips and backs of hands get very cold and cannot be warmed in any way.

Often has aversion to people.

Talks too much in company; desires to say something witty to make people laugh.

Easily offended.

Catarrh; raises much after eating.

Hair dry; much dandruff.

Distress in stomach; sensation as if rock in stomach.

Cannot digest meat; never has nausea; can digest only the simplest foods.

Constipation since childhood; stool sticky, like clay, hard to wipe clean; stool dark or light colored or dark green; tight feeling in rectum; stool, large, knotty—looks smooth and oily.

Thirst for cool water.

Exercise or exertion aggravates; feels better himself when he does not take exercise.

Becomes excited if pressed in business.

Desires plenty of heat.

Worse from becoming cold; "the bottom drops out of me if I become cold;" sitting in cold room gives him indigestion.

Aversion to beef and milk.

Likes canned peas.

Poor appetite, but after eating appetite returns.

Full of fear; fear of nothing special but as if something was going to happen.

Can read and concentrate mind except when he has that distress in the bowels.

Forgets names, also things he starts to do; sometimes forgets what he started to get.

Mouth tastes as if he had eaten too many eggs; back of tongue always coated.

Drinks much water and often.

Belching, with taste of bad eggs.

Urinates several times during the day; color light; sometimes red deposit settles in bottom of vessel; urine sometimes dribbles five or ten minutes after urination.

He has taken *kali-silicatum*, 10m., 50-m., and C.M., a single dose at long intervals. He is now in perfect health and has gained twenty-five pounds.

CONTRIBUTED

MANY, many thanks for having spared me from the "dead list." While I am not a practitioner (sorry to say), I am an enthusiast over Homeopathy and would far rather miss my Christmas dinner than miss one single issue of your most valuable and instructing and interesting CRITIQUE.

Yours, with heartiest wishes for an abundant success for your publication.

GUST. J. KORDULA.

Baltimore, Md.

KINDLY send me all the back numbers of THE CRITIQUE containing Dr. Kent's articles together with bill; also place me on your subscription list for as long as Dr. Kent continues to write for your journal.

I have studied Dr. Kent's work for eleven years and have had two years college work under him; there has never lived a man who taught Homeopathy or *materia medica* as intelligently as he. Without exception he is the greatest teacher that we have ever had, and the results of his work is now being felt throughout the Homeopathic profession. Without this work of Dr. Kent, the present awakening of Homeopathy would never have occurred.

It is not only for selfish reasons that I pray that Dr. Kent may be blessed with a long life, that he may be able finish much of the work he has started.

WM. H. SCHWARTZ.

Houston, Texas.

A CORRECTION.

AFTER READING Doctor Royal E. S. Hayes' letter in the January number of THE CRITIQUE, I cannot refrain from trying to correct some of his statements, which he probably would not have made if he had been more familiar with Doctor Kent's Repertory.

Every careful student of that remarkable work is well aware that Doctor Kent has made no "glaring omissions of important symptoms," as Doctor Hayes asserts in his letter.

Patients do not say that *they* are made worse from stooping, but that one particular symptom is worse from that position;

therefore "stooping" is not classed with generalities. It is a "particular" symptom and as such, Doctor Kent has put that rubric where it belongs, for example:

Head: pain; from stooping. (See page 155 of the first edition.) and under each *kind* of pain, as "bruised," "shooting," etc., will be found the rubric "stooping."

Eye: pain; when stooping. (Page 249.)

Face: pain; aggravated by stooping. (Page 378.)

We might go on through the rubric "pain" in all the regions, and everywhere will be found the "aggravation from stooping."

"Sitting erect," and "Sitting bent" are rubries that Doctor Hayes charged Doctor Kent with omitting from the "generals," but a careful search in the proper place will find them "on duty."

"Darkness" is also referred to as belonging among the "generals," but we would ask what it is that is affected by the dark? if it is a mental symptom it will be found in "*Mind*:" anxiety; in the dark. (Page 15); *fear*; in the dark. (Page 51.) There is a "Vertigo" on entering a dark room. (Page 103); and pain under "Head," aggravated by darkness. (Page 144.)

"Granulation," like the other rubries mentioned, is not a "general." As granulations may be healthy, slow or excessive, it must be defined in order to understand the condition. If the granulation is excessive, we interpret it as "proud flesh," and find that rubric in "*Skin*:" ulcers.

If, on the other hand, there is slow granulation, "slow to heal" will be found in "Generalities," under "Wounds."

While there is no necessity of this discussion so far as old students of Kent's Repertory are concerned, it does seem that Doctor Hayes' statements ought to be refuted, in justice to Doctor Kent and to Doctor Loos, and especially that new students of repertory work may not be mislead.

Very truly,
Brewer, Maine, January 20, 1909.

CARRIE E. NEWTON.

A SHORT SERMON.

IT IS RATHER discomposing to one who carries the interest of Homeopathy next his heart to read the slurring comments on men of other schools and of those who are not strict Homeopaths in some articles which come out in our journals from time to time. I do not wonder that editors have to relieve themselves of responsibility for the statements of their contributors.

The great majority of all schools are conscientious and consistent according to the kind of knowledge which they possess.

What can possibly be gained by applying disagreeable epithets? Put it this way; suppose I have long had views on a given subject based on a certain amount or kind of information on that subject. Suppose someone who has views based on more or different information starts out to tell me what is what about it and calls me a d—— fool or the equivalent, besides, how much attention would I pay to that subject and how much respect would I have for the opinions of my informant? Would my frame of mind be in a proper state to absorb truth?

Of course, no one takes these things seriously, but it does produce prejudice especially in minds already biased. Besides it makes the argument less potent and it distracts the attention from the thing it is desired to teach. It is psychologically unhomeopathic to the conditions we want to overcome; to use abusive or sarcastic language or terms.

The strict Homeopath occupies a peculiar position. He has an opportunity to teach if he will. The average Hahnemannian, owing to faulty teaching, owes his insight and skill usually to fortunate circumstances. Either he had a peculiar mental fitness for the work which drew him into it as if by fate or fortunate circumstances occurred which evolved him into the species *Hahnemanniae*. By virtue of the exalted privilege which is his it would seem that a due appreciation of the greatness of this privilege and of its obligations should deter from discourteous comments or terms directed toward those who do not see what he does.

I, for one, do not like that term mongrel, or, *mischling*, as it is in the German. Of course, the literal definition would be "mixture of breed." But I can see no reason why one set of men should apply it to other men of just as good breeding, except to give offense. If Hahnemann used the word in that offensive sense he may be pardoned as it was through righteous indignation from persecutions which he suffered at the hands of the allopaths, supplemented by the superficiality and misrepresentation of weak members of his own following.

At this stage of the progress of Homeopathy it should be strictly abandoned. Those physicians who think they are Homeopaths, but do not know how to use it so as to be able to depend on it alone, who through lack of advantages or temperament have not caught the efficient spirit of the art do great harm to the progress of the school whether intentionally or unintentionally and it would be proper to designate that class by some name suitable to their standing but it should be an inoffensive one.

Let us try to be helpful.

Jan. 11, 1909.

Farmington, Ct.

(REV?) ROYAL E. S. HAYES.

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

THE DENVER HOMEOPATHIC "HARMONY" CLUB

I held a somewhat heated session at the auditorium of the college of Physicians and Surgeons, Monday evening, January 18th, at which time officers for the ensuing year were elected. Several eligible candidates present, so I learn, were refused membership and their money refunded on account, so the dean of the college stated, of their being *undesirable citizens*. Inasmuch as both were graduates of the Homeopathic college formerly conducted in this city, their standing in society must have changed very materially in an incredibly short time, or else the rule or ruin policy of the harmony hunters connected with the Denver Homeopathic Club is considered paramount to all other considerations in its conductment.

I understand that Dr. C. E. Fisher, in his "heart-to-heart" talk before the club the fore part of January, suggested the name of Dr. J. B. Kinley as the choice of Colorado homeopaths for the position of president of the A. I. H.

What an inspiration.

Dean of a college-afraid-of-itself and lacking back-bone sufficient to take a stand for homeopathy, *president* of the American Institute of Homeopathy!

Well, there is one thing which Dr. Fisher overlooked, and that is that the approval of Bailey, Dewey, Royal, *et al* would be necessary before this additional burden could be placed upon an organization already handicapped by political piracy. M.

IN THIS ISSUE of THE CRITIQUE, I am printing the concluding comments of Dr. J. C. Hollaway upon the "Philosophy of Homeopathy."

This excellent preaching was presented to the International Hahnemannian Society at its meeting in Chicago last July, and unanimously voted the propagandistic product of the Society; a resolution prevailed at the time authorizing its publication for free distribution among members of the profession, although it was planned more particularly to reach the laity through this product.

Dr. Hollaway had a large number printed. THE CRITIQUE added to its distribution to the limit of its subscription list, *but* what of the I. H. A.?

Instead of being controlled by *all* of its members, an inconsequential wire-pulling faction usually prevails in all medical associations, and it is on this account that in the I. H. A. one must "kowtow" to H. C. Allen, J. B. S. King, and Guernsey P. Waring, or the "indian sign" will be attached to anything or any body against whom the wrath of this triumvirate may be directed.

Dr. Hollaway received a letter from Secretary King, early in December, saying that the cause for delay in sending out the propagandistic paper aforesaid was due to "lack of funds." Immediately after January issue of THE CRITIQUE appeared, in which Dr. Hollaway's name was printed among our special contributors, this same official of the I. H. A. advised him that the "committee had concluded to 'cut it out' completely."

For a cold blooded disregard of the wishes of the members of an association which holds up hands in holy horror at anything unhomeopathic, this bold piece of effrontery would do credit to a class of individuals of which, fortunately, the rank and file of the membership of the I. H. A. is not composed. M.

New Medical Books

DISEASES OF THE NERVOUS SYSTEM—By John Eastman Wilson, A.B., M.D., Professor of Diseases of the Nervous System, New York Homeopathic Medical College and Flower Hospital, and in the New York Medical College and Hospital for Women; Neurologist to the Flower Hospital, Woman's Hospital, Hahnemann Hospital, Laura Franklin Free Hospital for Children, St. Mary's Hospital, Passaic, N. J., and Consulting Neurologist to the State Hospital, Middletown, N. Y. The book contains about 500 pages. Price, in cloth, \$3.50; half-morocco, \$4.50. Boericke & Runyon, Homeopathic Publishers and Chemists, New York and Philadelphia.

This book will be found very useful and meets the indication of a text-book for students, for whom it was written.

The material has been carefully and well selected, is sufficiently elementary and covers enough of the essential points of anatomy, physiology and pathology to give the student a clear idea without going into an exhaustive discussion. It is up to date and embodies the latest conception of neurology.

The classification is simple and well calculated to leave an orderly impression upon the reader's mind.

The style is excellent; the ideas presented clearly and concisely. The very swing of the well-balanced sentences carries one through the page of necessarily heavy material and leaves the reader with the gist of the thing in the mind's eye.

There has been a decisive stand for brevity, so much so that at times clearness has been sacrificed and the meaning made somewhat ambiguous. The reader is quite certain that the writer is master of the subject, but occasionally leaves out a word to which space might better have been given. This fault is not sufficient, however, to interfere with the usefulness of the book.

This review does not include the drug-therapy, since the reviewer was not in a position to criticize it from the point of view of the writer. The treatment, as far as it deals with agents used by all classes of clinicians, is excellent and presents the consensus of opinion of the latest writers.

Altogether the book is a good one and will, no doubt, be soon found as it deserves, upon the shelves of all classes of practitioners.

EDW. WM. LAZELL, M. D.

Miscellaneous Matter

Send Us a Personal Item Occasionally

Dr. Carl D. Fisher now occupies the position of "Editor Extracts and Events" on **Progress**.

* * *

An exchange says that "figs, split open, form an excellent poultice for boils and small abcesses."

* * *

The man who never made a mistake shows that he has "asleep-at-the-switch-itis" in an incurable form.

* * *

Dr. James P. Warbrasse announces his retirement from medical magazine editorship, with the December issue of **New York State Journal of Medicine**.

* * *

The North American Journal of Homeopathy lost a most capable homeopath when Dr. P. W. Shedd resigned from the editorial staff of that publication.

* * *

We wish to apologize to Dr. Almfelt for our statement in December issue regarding the lecture before a local K. P. lodge. Dr. Gustafson was the guilty individual.

* * *

Dr. C. E. Fisher, formerly of Chicago, now located at Sterling, Colo., gave an informal talk before the Denver Homeopathic Club, Tuesday evening, January 5th.

* * *

Dr. A. Garfield Schnabel advises everybody who has a back yard to keep a goat and derive milk therefrom. Yes, but if someone were to "get your goat," what then?

* * *

The Lord Mayor of London is a homeopath and the homeopaths of the "old country" hope to have many concessions granted them in that city during his term of office.

* * *

"The Doctor's Christmas," leading editorial in **Medical Counselor**, is a particularly well written piece of pleasing fact; really, Dr. King, you should turn your attention to story writing.

* * *

Dr. Walter H. Keesee (K-Z), of Kansas City, representing Parke, Davis & Co., proved a pleasant and profitable visitor at the editorial office, one of the last days of last year. Come again.

* * *

The New England Medical Gazette entered upon its forty-fourth volume with the January, 1909, issue. Dr. John P. Sutherlans and W. H. Watters are the editors of this progressive publication.

* * *

The State Superintendent of Public Instruction of Illinois, Blair by name, thinks there should be introduced in every public school course a series of lessons on the art of making love. "I don't think."

"Jottings, published occasionally" by Boericke & Tafel, was a very welcome visitor at this office last month.

* * *

The osteopaths had a pow-wow in this city during the holiday week of last year which was quite well attended. A number of out-of-town big guns of this faith added much to the pleasure of those who attended this meeting.

* * *

"There is so much bad in the best of us,
And so much good in the worst of us,
That it hardly behooves any of us,
To talk about the rest of us."

* * *

Occasionally we get a roast from some subscriber for some apparent inconsistency connected with the editorial and business ends of this publication. Dr. J. W. King, Bradford, Pa., was the last one to grill us. Thanks, doctor.

* * *

"Backbone" is the title of a bright, breezy bit of borrowed stuff, collected from various sources and arranged by S. DeWitt Clough, of Ravenswood, Chicago, Illinois. **The Critique** feels deeply grateful for the copy sent this office by the compiler.

* * *

If possible do not fail to attend the meeting of the Southern Homeopathic Society at New Orleans, the 24th, 25th and 26th of this month. There will be entertainment and homeopathic nourishment for all. Even the "grand officers" of the A. I. H. will be there.

* * *

Red Book speaks of Dr. Dearborn, the skin specialist of New York, as being a specialist in Diseases of Sin. Not so far off the track as to hurt. A doctor who makes diseases of children a specialty is accused of paying particular attention to Diseases of Chicago.

* * *

Dr. A. R. Hagle, in a lecture before the Chicago College of Medicine, told his hearers that "A doctor can prepare himself to treat lovesickness through mental influence just as more serious ills are treated by it," and suggests as a specific for this complaint the finding of a new love. That has been known to work, - but in some cases the cure is worse than the disease.

* * *

Jim Jeffries has been offered \$50,000 to fight Johnson who recently acquired champion honors in the heavyweight section of pugdom. What's the use of practicing medicine, or law, or being a banker when such easy money is in sight at some easier employment?

* * *

We desire to acknowledge receipt of several copies of "Purity," the 1909 Antikamnia Tablet calendar. It is an Antikamnia production of the highest artistic order and that is saying quite a good deal in that direction, as this company never issues anything "cheap."

The North American Journal of Homeopathy gives some exceedingly "foolish reasons for being a patron of homeopathy." If you have anything that is hurting you, "get it pulled." If you don't like the Journal of the American Institute of Homeopathy why don't you say so?

* * *

Dr. Algernon Thomas Bristow, is the new editor of the New York State Journal of Medicine. The complexion of the cover page has become more pallid, but then that occurs even in the best regulated publications; for instance the Journal of the American Institute of Homeopathy.

* * *

"I will be loyal to the homeopathic journal, college and hospital, wherever it may be" is one of the resolutions advised by a certain publication of limited circulation. Rather an up-hill proposition to impose upon anyone living in Denver. Oh, of course, they could take The Critique.

* * *

The Critique regrets to announce the death of Evelyn Greenleaf Sutherland, (Dorothy Lundt), wife of Dr. James Preston Sutherland, editor of New England Medical Gazette. She was a dramatist of note, many of her plays having found popular favor both in England and America.

* * *

"Dr. Helen H. Woodruff, of Los Angeles, has taken up work again after a prolonged trip to the Eastern States," says the Pacific Coast Journal of Homeopathy. Dr. Helen is a graduate of the old Denver Homeopathic and her many friends in this locality will be glad to learn of her prosperity.

* * *

The prospects for the coming meeting of the Southern Association like wine "improve with age." Official notice has just been received from Dr. Horner, secretary of the Institute, calling a meeting of the Executive Committee February 23, 1909, at the St. Charles hotel, New Orleans, La. This will leave them free to attend the session of the Southern the following three days.

* * *

Dr. E. Percival Gerson, a well known physician of Los Angeles, Cal., has given up a lucrative practice, well-equipped offices and other luxuries and has moved to the thinly settled suburbs of the city where he proposes living a life after his conception of how Christ would exist were he on earth at the present time. He will accept voluntary contributions for his services, but will make no charges.

* * *

We are pleased to publish in this issue a very interesting article from the pen of Dr. E. G. Whinna, medical inspector of schools of the city of Philadelphia, Pa., and which was read before the Parents' and Teachers' Association of that city. Dr. Whinna is also physician in

charge of the Philadelphia Home for Infants and Assistant Ophthalmologist to the West Philadelphia Homeopathic Hospital.

* * *

With the January issue of **Cleveland Medical and Surgical Reporter**, Dr. W. H. Phillips retired as editor; Dr. H. D. Bishop who has acted as business manager for twelve years, also severed his connection with the **Reporter**. N. T. B. Nobles, M. D., succeeded to Dr. Phillips' position while Miss R. E. Tompkins took Dr. Bishop's place. **The Critique** wishes both retiring and incoming officials much prosperity and happiness.

* * *

Our Apologies to "Progress." The editor of **Progress** calls the **North American's** attention to the fact that the editorial remarks re the new Institute journal credited to **Progress** should not be charged to it. This is so; it was **The Critique**, also of Denver, from which emanated the **North American's** comment. It is understood that **Progress** and **Critique** do not speak as they pass by; hence the **North American's** error has hurt the more.—**North American J. of H.**

Progress, no doubt, is grateful that even a mistake should secure for it mention outside of the **American Institute Journal**.

* * *

Dr. Pearl B. Wheeler, medical inspector of the Denver public schools, delivered a very interesting and instructive lecture before an assembly of teachers thereof, the latter part of last month. Dr. Wheeler has accomplished much good in her official capacity and her work has been much appreciated by the poorer classes, among whom her efforts are more in evidence. Dr. Wheeler is a graduate of the old Denver Homeopathic College, of which institution her father, Dr. B. A. Wheeler, was president when that institution held a high position among medical colleges of the country.

* * *

Without any particular flourish of trumpet or other unnecessary noise, the first issue of **Journal of American Institute of Homeopathy** put in an appearance the first of the new year. Barring a slight pallor of cover as compared with this somewhat florid feature of its predecessor, very little difference is to be detected between the old publication and the new. The arrangement of news items from different localities is good, even though some of the information contained therein bears the ear mark of unreliability. That joke about the Park Avenue hospital paying off its debt, for instance? Guess the least said about that the better, however, as the news man evidently took that from **The Critique**.

* * *

Notwithstanding financial flurries, war and rumors of war, and many other means of diverting the attention of the average manufacturer, Antiphlogistine's makers have had a most wonderfully successful year in the one just past. Their product still maintains its superiority over all other products even pretending position in its class and the makers have ever displayed a generosity towards the public

quite in accord with their free-heartedness in other respects. As an evidence of this peculiarity their latest demonstration was directed towards the medical press of the country during the past holiday season, when they presented editors and others with a very handsome and useful desk ornament in the shape of a combined paper weight and clock. **The Critique** acknowledges receipt of one, and must say that the thoughtfulness of the Denver Chemical Manufacturing Company in remembering us is very much appreciated.

* * *

At a meeting of the Denver Homeopathic Club, held in the auditorium of the college of Physicians and Surgeons Monday evening, January 18th, the following officers were elected:

President, O. S. Vinland, M. D.

Vice President, A. C. Stewart, M. D.

Secretary, C. D. Fisher, M. D.

Treasurer, J. B. Brown, M. D.

Censors, Doctors J. B. Brown, G. S. Peck, J. P. Willard.

In the selection of Dr. Vinland as presiding officer of the association much of the ill feeling which has existed in the organization should be blotted out and an era of prosperity and progression ushered in. He is a man well thought of by all; conservative; just; and, withal, the right man in the right place. **The Critique** wishes the club unbounded success if for no other reason than that it elected a capable man to its official head. Those who were classed as "undesirables" need look for anything but scant consideration insofar as the new board of censors is concerned. The Denver Homeopathic Harmony Club is a hummer.

* * *

Dr. Henry C. Allen, dean of the Hering Medical College, died suddenly at his home, 5142 Washington avenue, yesterday. Dr. Allen returned to his home from the Medical College early in the afternoon. At 3 o'clock he called his wife and said that he was feeling ill. A physician was summoned but before he arrived Dr. Allen died. Heart disease was given as the cause of death. The doctor was born in London, Ontario, October 2, 1836. He came to this country in 1875 and shortly afterward accepted the professorship of *materia medica* at the University of Michigan. In 1890 he came to Chicago to accept a similar position in the Hahnemann Medical College. He founded the Hering College, in 1892, and has been dean since that time. A widow and two children survive him: F. A. Allen, insurance agent, and Mrs. C. W. Aird, both of this city. The doctor was a member of the International Hahnemannian Association and of the American Institute of Homeopathy. He was the author of several books on medicine and contributed prose and poetry to literary publications. He was graduated from the Cleveland Homeopathic Medical College, Cleveland, Ohio.—Clipping from Chicago paper; date not given.

READING NOTICES

O f I n t e r e s t t o E v e r y b o d y

FOR SALE—Copy of Kents' Repertory in fair condition. Price, \$8.00 delivered. Address Dr. Chesshir, Peabody, Kansas.

ANNOUNCEMENT—Publishers of *The Critique* are unable to supply copies of reprints of Dr. A. M. Linn's article upon "The Legal Statutes of Variolinum."

IMPORTANT NOTICE—Battle & Co., St. Louis, Mo., have issued number 8 of Dislocation Chart series. Physicians desiring any back numbers can get same upon request.

ALLOUEZ WATER—This famous magnesic-calsic water of the Allouez Springs, Green Bay, Wis., is gaining in popularity among physicians of Denver every day. Scholtz Drug Company are the distributors, and are kept busy supplying the call for this most excellent natural regulator of nutrition and assimilation.

HOMEOPATHIC PHYSICIANS—Homeopathic physicians, above all others, should be particular about using any but thoroughly reliable homeopathic preparations. In order that one may be on the safe side always is to use Boericke & Tafel goods. The A. G. Clark & Co. Pharmacy, Albany hotel, corner of Stout and Seventeenth, Denver, are the sole and only representatives of this line in the city.

SAFE ANTISEPTICS IN GONORRHEA.—Tincture of iodine irrigations in solution of from one to four drachms to a quart of hot water is said to be one of the safest and best antiseptics that can be used in gonorrhea. The strength of the solution and number of irrigations a day depends upon the stage of the disease. To keep the urine bland and non-irritating sanmetto should be administered in teaspoonful doses three or four times daily throughout the treatment. In case of extreme acidity of the urine one of the potassium salts will be found helpful.

SANMETTO IN IRRITABLE BLADDER.—Sanmetto acted charmingly in my own case of irritable bladder, with frequent micturition, which was very annoying at night. I had tried saw palmetto, salix

nigra, buchu, juniper, acetate potash, benzoic acid, etc., etc., without any relief. After taking about two ounces of sanmetto I noticed an appreciable change for the better, and before finishing the bottle I was practically well. Being so well pleased with the results, I have placed sanmetto on my shelf and am dispensing it. It is a charming combination and I take pleasure in relating my experience with it.—Geo. H. Riley, M. D., Bloomdale, O.

In the wasting diseases, as well as in rickets, scrofula and marasmus it is of the greatest importance that a remedy be selected which will quickly check the pathological condition, and restore the organism to the normal without producing digestive or other functional disturbances. Cod liver oil has always stood first in the category of remedies calculated to bring about this desirable result, but unfortunately its peculiar odor and taste are features which are quite often objectionable to patients. Hagee's cordial extract oil morrhuae compound is an elegant preparation, containing all the essential therapeutic properties of cod-liver oil combined with tissue building chemicals (hypophosphites of lime and soda) and aromatics, which renders it agreeable to the palate.—*American Journal Dermatology.*

TREATMENT FOR INFLUENZA—It is well known among medical men that rest, simple rest in bed will cure a great many cases of influenza. Symptomatic treatment, however, gives the best results. The pain should be relieved by an anodyne. Quinine should be administered all through the attack, as it has a stimulating effect and antipyretic action and seems to destroy the bacillus. When the pain is severe, two antikamnia tablets every two or three hours will give much relief. To relieve the cough when it is accompanied with a great deal of pain, one antikamnia and codeine tablet every two or three hours dissolved on the tongue, acts very promptly and successfully. That codeine had an especially beneficial effect in cases of cough, and that it was capable of controlling excessive coughing in various lung affections, was noted before its true physiological action was understood. Later it was clear that its power as a calmative was due, as Bartholow says, to its special action on the pneumogastric nerve. Codeine stands apart from the rest of its group, in that it does not arrest secretion in the respiratory and intestinal tracts. In marked contrast is it in this respect to morphine. Morphine dries the mucous membrane of the respiratory tract to such a degree that the condition is often made worse by its use; while its effect on the intestinal tract is to produce constipation. There are none of these disagreeable effects attending the use of antikamnia and codeine tablets.

COD-LIVER OIL IN CONVALESCENCE FROM ACUTE LUNG DISEASE—The unquestioned value possessed by cod-liver oil in all conditions of reduced vitality and particularly in those marked by serious nitrogenous waste, has won for it the most extensive use and firmly established it in the medical profession's favor. Not alone in chronic disorders, attended by mal-nutrition, has its worth been demonstrated but also as a builder of tissue and a restorative in convalescence, especially in that state following acute lung and bronchial inflammations.

At the present season, keeping in mind the prevalence of lung and bronchial diseases, cod-liver oil's possibilities as a food and tonic for convalescents from pneumonia and other acute respiratory ailments should not be overlooked. Few diseases leave a patient so utterly broken-down and so susceptible to a still graver disease as do these acute infections of the lungs and bronchi. Judicious care and a properly chosen therapeutic regimen, during the several weeks immediately following a pneumonia, may determine the difference between complete recovery and the grafting on of a tubercular process.

At this important period, the indicated remedy, cod-liver oil, stands out in bold relief against a back-ground of a host of drugs. But care must be taken that a palatable preparation be chosen, for, though, a serviceable product be selected, if its use disturbs the stomach and interferes with this important organ's function, its value will be vitiated by the harm done to the gastric apparatus.

Hagee's cordial of the extract of cod-liver oil compound is the ideal preparation of this class and daily it demonstrates its efficiency in the hands of thousands of physicians. Extemporaneously prepared cod-liver oil combinations cannot receive serious attention when the medical profession has at its command such an elegant, palatable and yet, withal, meritorious agent as Hagee's cordial of the extract of cod-liver oil compound. Granting, however, that a product prepared in small quantity and at irregular intervals has some merit, it cannot be so trustworthy as one which is prepared in large quantity and accurately compounded by men who make its preparation a life work.

It is this feature that puts Hagee's cordial at the head of the cod-liver oil preparations, insuring for it stability and certainty of composition. The efficiency of this cordial of the extract of cod-liver oil as a reconstructive is largely enhanced by the addition of the hypophosphites of calcium and sodium, which are in themselves tissue foods of the highest order. The routine administration of Hagee's cordial during the period of convalescence from acute lung and bronchial diseases practically insures against such a serious consequence as tuberculosis and reduces to a minimum the possibility of chronicity of the original disease.—**Medical Era.**

THE BLOOD DYSCRASIAS OF PREGNANCY—It is evident that the female economy undergoes profound alteration during pregnancy. The whole organism is subjected to unusual strain and the necessary changes in the general metabolism invariably increase the tax, not only on the constructive forces of the body, but on the eliminative functions as well. The slightest failure to throw off either the waste products incident to the necessarily increased physiological activity of the mother, or those resulting from the establishment of the more complex metabolic processes in the fetus, always tends to create a vicious circle of blood dyscrasia that is not infrequently fraught with great danger. For instance, faulty elimination means embarrassment of the hematogenic function, with hemolytic changes more or less severe, and these conditions in turn not only coincidentally increase the amount of waste substances to be excreted, but directly lower the eliminative capacity as well. In other words, the initial effect tends to exaggerate the pernicious influence of the primary cause, and the accumulative result is therefore the most dangerous feature.

Hence, it is little wonder that slight deviations from the normal during pregnancy often assume certain serious aspects that are out of all proportion to their first importance. All this teaches that comparatively slight ailments are unknown quantities when met in connection with the pregnant state, and should be treated not on the basis of their apparent significance, but on the basis of their possible dangers.

The blood dyscrasias, particularly the anemias, because they are most easily demonstrable, call for early correction in pregnancy. It requires no argument to show that much depends on the physiological activity of the cellular elements of the blood, and any deficiency in their number or functioning capacity is always portent of evil. Vigorous treatment is necessary and among the really effective therapeutic measures at the command of the profession, Pepto-Mangan (Gude) is especially worthy of prominence. This widely known and widely used product possesses marked hematopoietic properties, and its effect on the increment of new blood cells gives valuable aid in promoting rapid and effective elimination.

Extensive experience has shown therefore that in no condition is Pepto-Mangan more useful or prompt in its results, than in the blood dyscrasias of pregnancy. Its immediate action is not only satisfactory, but its extensive use for some time previous to delivery, as well as subsequently, favors rapid convalescence during the trying post-labor period, with very noticeable effect on the local phenomena of involution.

Briefly stated, Pepto-Mangan (Gude) is a tonic hematic, unusually potent for good, and absolutely free from harm. Its more than substantial success in this class of cases is the most convincing argument for its continued use.

VOL.
XVI

ORIGINAL ARTICLE

No.
3

Denver, Colorado, March 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

PRESCRIBING FOR THE PATIENT, NOT THE DISORDER.

Julia C. Loos, M.D., H.M.

W. M. L., aged 35-yrs., had been for six years, benefitted by causticum, at various times, suffering many manifestations. In 1900, the year when a mild type of variola appeared more or less epidemic throughout the country, he was residing in a New York suburb, and reported an eruption of very unusual type for him. It was observed in September, first reported in November and was not cleared until January, when a remedy was selected after repertory study. Caust., antimonium tart, and variolinum were used in November, December and January respectively, but the eruption and attendant condition continued. Eruption appeared on abdomen near groins, later around the umbilicus, also on leg and later on posterior surface of thigh. Beginning in form of pimples, itching, spread to one inch in diameter, inflamed, "hot," hard, red, swelling, resembling a gland in the groin. These developed tough walls of yellow color with discharge of pale pus oozing out, healing by sealing out in crusty scabs. Later there appeared pocket form pustules on red, inflamed, base, sore while forming; discharge greenish-yellow after which crusty scabs formed, with itching sensation. As the spots dried up, they became less painful. New ones developed as old ones healed and in the same localities and on the arms. Scars remained dull red. Later ones run their course in shorter time, perhaps from the influence of the remedies administered.

Until January there were no other symptoms gleaned, then fever observed one night, with perspiration. Perspiration observed on waking in mornings, thereafter.

After three weeks' mental strain, headache; intense, bursting

pain, few nights after the fever noted. Languid, miserable, aversion to work. Following variolinum.

Eruption—latest spots scale and dry more quickly with one sore one continuing crusty over a moist surface. Then vesicular pocks and pustules developed at edges of old ones, painful, red, with bloody, purulent discharge.

Sneezing, shivering, twinges of pain through thorax and scraped sensation in pharynx at this time suggested cold effects.

An unusual condition appeared here, uncommon, from no apparent contamination, different from all the previous conditions in this patient and from contemporary complaints in other patients observed. The only way to find the remedy needed is to select the most characteristic features and find the most similar remedy. There certainly are peculiarities of the eruption in this case.

With both "Pustules" and "Pocks" we find this list:—ant. c.³, ant. tart.⁴, arn.², ars. alb.³, bell.³, bry.², coccul.², hyos.³, kali bi.³, kreos.⁴, merc.⁴, psor.³, puls.³, rhus t.⁵, sil.³, sulph.⁴, thuya².

Desquamating Eruption: bell.³, kreos., lach., merc., puls., sil.², sulph.

Yellow discharge: ant. c.³, ars. lach., merc., puls.³, rhus.², sil.³, sulph.³, thuya.

Bloody discharge: merc.

Red areola: ant. t., thuya.

Coppery eruption: ars.², kreos.², rhus. t.

Coppery spots: merc.².

Abdomen eruption: ars., bry., kali bi., merc., rhus., sulph.².

Thigh eruption: ars. kali bi., kreos., merc., psor.², sil.², sulph., thuya.

Leg eruption: ars., bry., kali bi., lach., merc., puls., rhus.², sulph., thuya.

Up to the time of this study, new pustules had continued to form, as described. Merc. sol., 6m., was administered and in three days the last spots had cleared, closed; drying quickly, with no new ones following. The recent symptoms as from effects of cold, continued a few days but improved. Ten days later agaricus mental condition and remaining cough, with few other shading symptoms, led to the use of that remedy and the lawyer was restored to his usual good condition.

In this connection, we are reminded of Hahnemann's remarks in § 100 of the Organon, concerning sporadic disorders. The *experience* of the attending physician or those who might be available for consultation, might easily contain nothing resembling the case in hand. The "pure effects of proved remedies" contains such effects and the records, in repertorial form prove the safest guide to the prescriber who does not recognize the exact remedy needed, on first contemplation.

It is also interesting to observe that although the eruption had continued to appear in new spots during five months, its renewal was checked within three days after the most similar remedy was in control of the vital force, and all the old spots cleared.

* * *

The following case illustrates the value of using characteristic symptoms as a guide to the remedy, without consideration of the name suitable, in acute disorders. Bertha K., eight and a half years old, had been much benefitted by kali c., until she moved from the neighborhood, with her family. Soon after changing residence an acute disorder was the occasion for attendance by the local doctor; a month later her condition led the parents to write for medicine.

Cough, tight, from tickling in larynx, later, looser and less frequent; aggravated about midnight; 2 a. m., and 6 a. m.; aggravated reclining on right side and back; ameliorated reclining on left side; aggravated in open air and windy weather; during cough, pain under scapulae; redness of face; headache after cough, eyes swollen; expectoration most in morning, white.

Appetite poor.

Respiration: aggravation of difficulty, reclining on left side.

Urine, greasy appearance on surface.

This was all that was at hand as the reports came by mail.

In this, then, we must seek to perceive the patient. The features that are not common to cough paroxysms must be our guides. Here they are: *Cough reclining on r. side; cough reclining on back; cough aggravated in open air; face red during cough; urine, cuticle on surface.* Add to this the time of worst cough and we shall be led to consider phosphorus and kali bich., and to select kali bich.

This remedy was sent. In five days report was returned, "Improvement in cough, in appetite, in rectal evacuations. Vomiting after cough after eating; ejecting both food and mucus." Later report was that many children in neighborhood had pertussis at this time, but Bertha had been much more comfortable and suffered a lighter seige than most of them. This fact, her parents wisely ascribed to the remedy which influenced the condition as soon as it was used.

The secret of homeopathic prescribing is to depend on the characteristics of the case to be treated, regardless of the pathologic name and of what other people have used in such conditions. Frequently the serious aspect of the case, or the recognition of a lesion seriously controlling the machinery of the organism tempts the prescriber to attempt to govern his prescribing by the local affection or the concern of the friends. Here it is to be remembered that the requirement of the true physician is an unprejudiced mind, sound comprehension and attention and fidelity in noting the characteristics of the case.

* * *

A large woman of 67 years, whose heart had for years been a subject of remark by her attending doctors, was much distressed by rheumatic pains in the thighs, bend of the knees and feet, crippling her much in rising from a chair and in changing position in bed, waking her from sleep and occasioning much disturbance generally. There were also similar pains in arm, shoulder, thorax and much distress from an intermittent sharp pain in left lumbar region of abdomen. This appeared at times to extend to the cardiac region or was associated with sensation of fullness, crowding the heart. Other evidences, in circulation directed attention to that organ.

These symptoms had persisted for many weeks when the following symptoms were noted:

Thorax, sensation of constriction across lower part, pain on inspiration.
Pulsating felt throughout the body; headache as if "all the blood were in the head."

Face: red spotted: tiny pin-head, bright red spots, swelling beneath eyes. Countenance approaching besotted aspect, relaxed, heavy.

Mental condition, indifference to things of usual interest; all exertion too much trouble, aversion to thinking.

Chilliness, cold in warm room; internal cold; external heat.

Sluggishness in every function.

These expressions, in a person of obese form, who had always been told that her heart would cease action suddenly some day, might easily cause one to direct attention to the heart and at the same time, hesitate to make a hasty prescription for the very troublesome pains in the extremities. Any remedy not suited to the very internals of this patient, which would be similar enough to change the rheumatic pains, would surely embarrass that burdened heart.

With these considerations, the most peculiar expressions in the picture are those which might at first thought appear trivial; yet they are characteristics.

Face, swelling beneath eyes: red spots. Obesity. These three symptoms, by reference to the repertory, lead us to consider aurum, and merc.; secondarily, ars., calc-ars., kali c., olnd., phos. and puls. Comparison of the case with the provings of aurum, soon establishes the relationship of similarity to the disorder to be treated in this patient and the administration of aurum is followed by most acceptable confirmation. The actual heart condition in the case has many times been palliated and even improved under the influence of several different remedies, in various patients. The aim must be always to select from our many heart tonics (as our patients have learned to call them) the one remedy which will act curatively upon the patient, actually under consideration. Forget the heart danger, if possible and turn attention to searching for the symptoms peculiar to and expressive of the patient herself, the unusual and unexplainable symptoms. These will characterize the remedy she needs.

In making the repertory anamnesis, it should always be dated. It is advisable also to include it as part of the record.

Harrisburg, Penn.

SPECIAL ARTICLE

SKETCH OF KALI BROMIUM.*

R. del Mas, Ph.D., M.D.

MANY, many years ago, a man of thirty, with *dark hair, sallow complexion, and rigid fibre, thin and spare*, who, through inheritance was *weakly, sad* and easily affected by grief and sudden *emotions*, timid and full of fears, thought life could be more bearable if he took a wife unto himself; and he sought to find one. His dark eyes, full of melancholia, ready to weep from the least thing that should hurt his delicate and over-sensitive nature, rested with joy and hope upon a beautiful, red-cheeked, but serofulous maiden, of twenty. Her eyes were light blue, her hair flaxen, her eye-brows light, her skin fair and delicate. Their names were respectively—*Potassium* (alias *Causticum*, or *Kali*) and *Bromium*. As they loved each other deeply, the young couple, through the bonds of matrimony, were united together as man and wife, on a bright June morning, and the balmy air rang forth with the joyous peal of the bells and larks.

They settled in a maritime country, where the air was damp and the rain abundant. Such an atmosphere was very favorable to the ailments Mr. *Causticum* was subject to; as to his lovely wife, this kind of climate did not seem to disagree with her, much, because she could not stand to be over-heated. A queer fact, because her father, an old sailor, would have the asthma whenever he came ashore. But, of course, she had never been a sailor, and all of her life had been spent not far from the coast.

From their union a *large* boy was born. Weighed twelve pounds. His mother was nearly as large at birth, and the baby had the *dark eyes* of his father. Still, in general characteristics, he looked like both parents, were it not true that new-born children do not look like everybody. But *Natrum*, a relative of the family, did not believe they did, and, being his godfather, thought it was very appropriate to name the child after both parents, so

*Written for the Minnesota State Homeopathic Institute, Ses. 1908.

the progeny of Mr. Causticum was given the name of Potassium Bromide, commonly known as Kali-Brom.

Soon after his birth, the nurse noticed he was very *nervous* and *restless*. Had he been older, indeed he would have had ascarides. He would not keep still for a minute while awake. He kept moving his little fingers incessantly, or showing his anxiety to move about. If he were not obeyed he would cry and cry. He must *be doing something perpetually*. Very tiresome, was it, to mind such a child, and a very peculiar specimen of human flesh to the wondered nurse. But father Causticum thought it very natural that a large child should be active; and, since this was his, why should he not be anxious like him? Nature never lies!

Every day, at 5 p. m., our baby would have *colic*, aggravated by *warm applications* (the opposite of those of *magnesia phos.* and *arsenicum*), and apparently, but *not really*, ameliorated by *continual motion*, unlike *magnesia carb.*.

Chamomilla et fennel teas were given, but to no avail. Cousin, *Kali-Carb.*, was having his colic worse at 3 a. m.; *Kali-Iod.*, at 4 a. m.; *Kali-Phos.*, at 2 a. m.; and *Kali-Bi.*, at 5 a. m. Very strange, indeed, these *Kalis*! In the same community lived other colicky babies: *Jalapa*, was well during the day, and sick the whole night; *Anisum* and *Illicium* began to scream at 5 p. m., like *Kali-Brom*, but kept their contortions on till 12 p. m., when *Arsenicum* would begin to cry and be restless until 3 a. m.; and there were also *Chamomilla*, *Colocynth*, *Dioscorea*, *Stannum*, and *Veratrum Album* babies. *Colocynth* and *Veratrum* doubled in two, the latter having cold sweats on the forehead; as to *Dioscorea*, he straightened the body out; the cranky *Chamomilla* tossed about in agony, screamed, and yelled, wanted to be carried all the time (*arsenicum*, *magnesia-carb.*, *cina* and *kali-brom.*), but did not double up. *Stannum* kept still as long as his mother carried him, with his *abdomen* pressing on her shoulder. Some spoke of *Lycopodium* as having colic from 4 to 8 p. m., and of *Staphisagria* as having it also *after anger*, after being punished, after emotions, just like *Colocynth* and *Chamomilla*, and passing very offensive *flatus*. His eyes troubled him also with *styes*, and his brother's teeth were *black* and *crumbling*. *China* never failed

to wake his nurse at 12 p. m. His abdomen being as hard and distended as that of *Cina*, minus the rocking and dandling of the latter. Baby *China* was puny, weakly, anaemic, chilly; baby *Cina* was very touchy, bodily and mentally, smelled sour, rubbed his nose, always hungry, although vomiting and spitting his food; like *Stannum* found relief in being carried with the abdomen resting on the mother's shoulder. As "crabbed" as *Chamomilla*, plus sensitiveness to touch. China did not want motion, because it aggravated him; but hard pressure relieved him also. In the neighboring village lived a fat, flabby, large-headed baby, with open fontanelles, sweating much about the head during sleep, and with damp, cold feet. His name was *Calcarea*. He had colic also; but he passed white clay like stools, while his relative, *Magnesia Carb.*, when he did not suffer from a "green, scum-like" diarrhoea, passed the potter's clay or putty-like stool, that smelled sour; and his face was pale and sickly, a kind of marasmus. (Nat-m. iodine arsenie.)

But we are far from dear baby *Kali-Brom*. Let us go to him again. As he was born in a well-to-do family, medical care was always had whenever he needed it. A doctor—an honest one—was called in to see the colic. He would give no medicine, saying baby would be well before he cut his first tooth, and an anodyne he would not prescribe, for he found the mother's milk was good, and nursing regular. His treatment did not relieve *Kali-Brom*. a bit. Another doctor was sent for. He did not talk so much as his predecessor, and thought it wise to make a dollar, for "he was in for the money." He gave baby what mother wanted; experience had taught him that all the people wanted was to be fooled. So, to make a long story short, the colic received an anodyne and welcomed it, that is, "went away before it."

For some time, the mother had noticed her child would nurse slowly; still, the milk or water did not gurgle down the oesophagus with a cluck, like in *arsenicum*, *cina* and *cuprum* babies. He only had some kind of difficulty in swallowing liquids. She looked at his tongue and found it not tied. The doctor who had so well relieved the colic and gained the confidence of the mother thereby, was again called to the house, and with the aid of a spatula and a headmirror, searched the pharynx of the baby

Kali-Brom., but found it anatomically correct. He merely remarked that with the help of a little medicine which he would prescribe (a placebo) the trouble could be held in abeyance, and very likely remedied to a great extent; and with thanks to God, everybody was satisfied.

Kali-Brom. was three months old when he developed *stomatitis*. His mouth was *dry, hot* and *numb*. He did not seem to suffer at all. The wise doctor thought it very strange the examining finger could touch the fauces and cause no contraction, but said nothing. A solution of potassium chlorate cured the stomatitis in three days. It was given internally.

As our dear little one grew older, it was necessary to give him some food besides the breast. His mother, through long nursing, had become weak and prostrated, with tremulous and cold limbs, palpitation, dyspnoea and nervousness. Her glands, naturally large, were growing larger, even her left ovary had become painful and enlarged also. Her doctor was talking of dissecting out some of the glands about her jaw, and contemplating a future ovariectomy. Things began to look black at home, and the baby, who was then eight months old, was nursed only three times a day. The rest of the feeding,—some prepared food,—was liked and enjoyed by the infant. One day, we are told, he was given some solid food, and, to the amazement of all present, *baby could swallow solids better than liquids*. Father *Causticum* was proud his child had a “queer” characteristic. So, from thence, *Kali-Brom.* was given plenty of solid food, and upon the advice of the family physician, he was weaned. It was not long before the dear creature had *convulsions from indigestion*. Soon after that, *twitchings, spasms*, developed from *emotions, delusions*, from being *chilled*, in fact, from any *peripheral or reflex irritation*. His father thought it quite natural, though it pained him to see it, and made him feel very nervous and ready to weep; and to himself would often say: “Indeed, Nature never lies; this is myself again.”

In the night *Kali-Brom.* would frequently *wake up in a fright*, and know no one, bewildered, frightened, unconsolable, unconscious from a broken sleep, like the *aesculus, carbo veg., kali-phos., lach., lyc., phosphoric acid, platina, sulphur* and *stra-*

monium children. After one of these *night-terrors*, he developed *squinting* for which he was operated at eight years of age, and very successfully by an eminent oculist.

That same child large and fat, *nervous and fidgety*, somewhat like mother *Graphites*, was *slow in learning how to walk and talk*. It was somewhat humiliating for the parents, but they thought that baby *Calcarea* never walked before his sixteenth month, nor cut any tooth before he was a year old; little cousin *Natrum mur.* did not talk intelligently before he was three years old; and the boy of *Mrs. Agaricus* was just like theirs, late in learning to talk and walk, and fidgety. The misfortune of others alleviated their troubles; and in that they resembled the human flock. Was *Baryta carb.* not a dwarfish child in mind and body? Could he be taught anything? Did he not have a silly laugh and an idiotic expression on him? And that way of hiding away from strangers, was it a sign of brain development? And the face of *Natrum mur.*, (*arsenicum, argent-met. and iodine*), was it not that of an old little man? The parents made the best they could with the tardy growth of the brain and spine of this offspring; it was none of their fault; if he was affected with *incoördination and weakness*.

His speech was difficult. He stammered. He hesitated to talk; could not get the right word. And once more, his father would say to himself: "He, indeed, is my son!"

Kali-Brom. was already five years old, when he had *diphtheria*, and of a peculiar kind, that which is characterized by *anaesthesia* of the mouth. In *stomatitis* he was locally numb also. Why should he deviate in diphtheria? His *throat* was *hot, dry, dusky, numb*, with *patches yellowish*, looking like washed leather, *extending downward*, just the same direction followed as in Cousin *Kali-Bi.*, and the reverse of that found in the family of his mother, that is *Bromium*. But *Kali-Bi.* coughed out strings of ropy mucus. While suffering from diphtheria, *Kali-Brom.* would have *spasms*, fits of *spasmodic cough*, and show an *aversion to over-heating*. Three months later he had croup with the same characteristics.

The year before he had what the doctors called "*bronchopneumonia*"; a very serious thing it was judging from what an

old lady said. He would cough up *copious, purulent expectoration*, the night especially; and, if the room was too warm, he would have attacks of *spasmodic cough*, with severe *dyspnoea*, throwing his arms about wildly, and *spasmodic movements of the muscles*, even *opisthotonus*. Indeed, spasms were a common thing with that child. His nervous nature always revealed itself with any inflammatory process or through reflex agents.

His mother, a very sympathetic person, worried a great deal about him; and worry aggravated her own sufferings. Of course, like her boy, she never liked to be overheated; croup and diphtheria she had had, but then and there her dyspnoea was due to obstruction or plugging of the air-passages, and not to nervous reflexes. As regards her husband, she never knew him when he was a young lad, and could hardly believe that he had been nervous, too, because he now was so quiet and inclined to be still. She hoped her boy would change for the better.

When *Kali-Brom.* was old enough to go to school, he showed a *natural dislike and incapacity for mental work, weak memory, and inability to sit still*, precisely the dispositions most unfavorable to the acquisition of learning. He would be constantly moving his fingers or other parts of his body to the greatest dislike of his teachers. But he could not help it. He had to work off his nervous state, or else he grew wild from anxiety. His face had an *idiotic expression*, with his mouth open very often, a *silly look* like *agaricus, calcarea, lachesis, laurocerasus, lycopodium, sepia*, bordering somewhat on *baryta carb., baryta mur., helleborus, and phosphorus*; vacant and thoughtless staring in acute or chronic idioey. *Kali-Brom.* was not a quick perceptive intellect with vivid eyes and sharp features. He was *mentally dull, could not remember words, so absent-minded; no mental stamina*; his mental field was simply a blank, a desert lonely and silent, dark and still. And again *melancholia, timidity and suspiciousness* were the sad tripod upon which rested his sad self. When he wanted to say something he hesitated, not because he forgot what he was about to say like *arnica* and *baryta carb.*, or to write as do *cocochicum crocus* or *nux-moschata*; but he *could not find the words to express his thoughts*; and in this he resembled *argentum nitricum, agaricus, anacardium dulcamara, lac*

caninum lachesis, lycopodium, phosphoric acid, even arnica, but above all *plumbum*. He would start to talk, then stammer as he was looking for the right word that never came, for he often would be using "hot" for "cold," "yes" for "no," and vice versa.

His *stammering, fumbling, mistakes and fidgets* would often cause the teacher to smile involuntarily or grow impatient, and the pupils to laugh. At the sight of this, poor *Kali-Brom.* would feel as though he were losing his mind. It seemed his *head* was torn off his shoulders with violence, or *ready to whirl*. The greatest *confusion*.

We should not wonder if he hated to go to school, if his schooling did not last very long, nor if the little he had did not do him much good. Still, he would have been kept in school quite a number of years so as to make him as proficient as possible to succeed his father in business or enter in partnership with him, because Mr. *Causticum* was losing his memory very fast, and, tired in mind and body, could no longer carry on on his business alone. But, when twelve years old, his *son* showed *choreic* symptoms which kept him in *constant motion to work off his nerves, always without relief*; Then and there his *urine* changed also; it became *pale and watery*. The family physician sent him into the country and put him on Fowler's solution with the result that, six months later, *chorea* was stopped.

In all of this there was nothing to surprise Mr. *Causticum*. He had gone through it all at the age of puberty, after having been exposed to some great change in the weather. He remembered the time when his muscles would jerk day and night; and he pitied his child with a flow of many tears.

Kali-Brom. was entering his sixteenth year, when, one *winter*, *pimples* and *pustules* broke out on his *face, neck, shoulders and chest*. The *pustules* were *bluish-red*, very unsightly indeed; but the *scars* they left were still more unsightly, having a *yellow-scaly* surface. The family physician was consulted. He called the skin disorder *acnea rosacea*. Washes, lotions and pastes of all sorts were used to cure the eruption which seemed to baffle the skill and wisdom of the disciple of Galen. As the boy, at the same time, complained that a *heavy pressure on his stomach*

followed every attempt at eating, the doctor said that, in this case, the dyspepsia was the cause of the acnea. He was to "fix" that stomach, although he had never been able to help ammonium carb., bryonia, hepar, iodum, kali-bi., lachesis, phosphorus, pulsatilla and sulphur who immediately after eating felt pressure in the epigastrium, nor china and lycopodium who had that feeling also a little while after eating. Still he promised the family the boy would be well in a short while. A "scientific" treatment was soon ordered and taken up to righten up that rebellious "digestive pibroch" that was indirectly causing havoc upon the features of a patient none too bright looking. After three months of guess-work, the doctor had the stomach under sail, but the skin continued to throw out purulent, bloody matter just the same, and to the perfect disgust of all concerned. Without winking a bit, and with great dignity, the medical man announced that with time and patience the face would grow better also, that the stomach amelioration favored a good prognosis. An alterative containing sarsaparilla, stillingia, lappa and potassium iodide was given, and, inside of six weeks, the acne was better, but the stomach grew worse; and a *peculiar cough with profuse, green, salty expectoration developed deep in the chest*. The scientific medico suspected *consumption*. Advice was resorted to, and the consulting physician gave up hopes and took in dollars. The alterative was cut out of the bill of fare, and, after a few weeks, the acne was once more in full bloom, the stomach grew quieter, and the cough and expectoration ceased. Great luck! Indeed was luck following the wise doctor at every turn of the road. And there are still some in the medical ranks who believe in "close prescribing" and "scientific honesty." At any rate, *Kali-Brom.* kept both his life and acnea, and other troubles he had had ever since he was born.

When he entered his eighteenth year, he still possessed his *papular eruption, weak memory, and incontrollable fidgettiness*, his *hands constantly busy* tying his shoes, playing with his watch chain, the head of his cane or the tip of his umbrella, picking thread from his clothes; always *worse when trying to sit quietly; busily working to wear off his state of nervousness and without relief.*

He also, at that time, entered in partnership with his father, and did his best to help him. He worked hard for a couple of years; but the harder and longer he worked mentally, the greater grew his *confusion and dullness of mind*, and *nervousness*. A poor help was he to a father already worn out and affected with locomotor ataxia. His mother about that time had her left ovary removed. She also was a wreck. That family was really very unfortunate, although it possessed worldly means. His father thought he had better retire from business. He sold his factory. Poor mother did not recover from the operation that deprived her of an ovary, and her doctor, with good intentions, dissected out one of her parotids that had recently taken an unproportionate size and was infiltrated with tubercles. Nine months after she died of pulmonary phthisis. Her husband and son were deeply affected by her loss.

The paretic state of *Causticum* increased, and the *nervousness* of *Kali-Brom.* grew worse. The mind of the son was nearly as confused as that of the father, and *paralysis* seemed to be willing to overtake him also. After a few years of *sexual irritability* and *nightly priapism* with *emissions*, coupled with *sexual abuses*, our dear and large boy, that seemed to promise so much at birth, was now thin, spare, worn out, and care worn, more deeply depressed, low-spirited, anxious and melancholy than ever; a complete wreck; *impotent, weak in mind and body*, with *spasmodic jerkings* here and there, and *sensations of lameness* in the *limbs*, and *backache with anaesthesia*; always *fidgety*, with fits of uncontrollable weeping. His occiput throbbed worse in the night than in the day; his spine often tickled him; his night-terrors, suspiciousness and fear were more potent than ever. Of course, he never could pass a certain point because, like *Argentum Nitricum*, in his delusions of vertigo, he could see things falling upon him. But his vertigo was now worse than ever. He often thought there was no salvation for him, that someone would poison him.

Intermingled with all this misery were *epileptic seizures* that threw his arms about wildly. He gradually sank down, deeper and deeper every day mentally and bodily, and died before his father, in abject depression with *melancholic delusions*, *hopeless as to God's Word*, having progressively stepped toward *paretic debility*, and nearly reached *imbecility*, giving a concrete example of the law of dissolution and the influence of psoric inheritance.

Centerville, Minnesota.

EVERY DAY PRACTICE

Peculiar and Unusual Cases Wanted

RECORD of cases: Carrie I.; age eight:

Oct. 28, 1907:—Hepartization of left lung.

Yellow expectoration.

Sweetish taste; wheezing respiration.

Wakes up frightened.

Voracious appetite.

Sulphur—500.

Dec. 6:—Peevish; irritable, morning after rising.

Forenoon.

Whining mood morning.

Increased action of heart.

Hot breath; lies with face on outside of bed to get cool air.

Perspiration of hands and feet.

Hunger 5 p. m.

Chest sensitive to touch.

Tuberculinum, 10,000 and 50,000, cured in eight months.
This case had been treated for asthma.

* * *

October 12, 1903:—A farmer, age forty; poison ivy of three years standing; gets a fresh attack from the dust of threshing.

Eruption on face, scalp and genitals; oozing of a yellowish watery fluid which dries, cracks and bleeds on face.

Itching, tingling, burning, stinging, vesicular.

Great redness, rawness of face.

Stinging, worse during perspiration.

Heavy rubbing aggravates, but a very slight touch, gentle tapping allays the itching; ameliorated also by bathing in hot water; worse in dust; sweating; cloudy weather; night, after lying down; warmth of bed.

Eyebrows rubbed off. Beard has to be clipped closely.

A typical case of *croton tiglium*. Application on the skin. Anacardium, 50 m, was given as I did not have croton tiglium, then, it did not benefit and on November 7th, croton tiglium, C. M., two doses at long intervals cured for one year.

September 30, 1904—Another attack from handling straw, but lighter, was cured by two more doses of croton tig., and the man remains so to date. (Dr. Kent's lecture on the remedy, fully describes the case.)

In neither of the above acute cases was the pulse nor temperature taken.

The doctor who is frequently taking the temperature will cause himself much anxiety, as by its practice the attendants are unobserving of symptoms and are only concerned about the temperature; it is unhomeopathic, but if you must use one, get an adjustable dummy.

I have had a personal experience during my illness of eight years, and abandoned its use after the first month or so.

Give me the mother or a near relative for a nurse; she who is an observer and knows nothing about temperature taking; leave that to the nurse under allopathic supervision; that is about all she does do.

* * *

Douglas I., age six:

March 23, 1907:—Hepatization of left lung. Twitches hands and feet in sleep.

Can only lie on back.

Picks nose and lips until they bleed; has picked a hole through the septum.

Bloating of stomach like a saucer, bottom side up; soreness, worse after eating.

Head sweats, wetting pillow all around; has worn the hair from occiput lying on back so long; now six weeks in bed.

Fine eruption on lower extremities which are cold and sweaty.

Is so weak he cannot raise head from pillow, or turn in bed.

Calcarea Carb—10,000.

April 30:—For the first time during his illness, frequent and incessant coughing spells began, with greenish-yellow expectoration.

Redness of both cheeks, worse left and worse afternoon.

Profuse head sweating worse on left side.

Calc-c, 10,000.

High fever, worse afternoon.

On May 30th out of bed; great stiffness of feet on walking.

Cough and expectoration about stopped.

Calcarea was repeated, and it was an error, as it returned the

cough and expectoration and had to be antidoted by *nox-vomica*.

Lycopodium, 5,000, was given a week later and practically cured the case.

August 29:—Continually boring finger in nose until it bleeds; irritable; cross in morning; itchiness of skin, sensitive to touch; alternate white and red sediment in urine=

Cina, 10,000.

Dec. 17:—Excoriation and rawness around anus, as if scalded by stool; sediment in urine white or red; alternate diarrhoea and constipation; dry cough.

Sulphur, 200. Two doses at long intervals, cured.

The above case had been diagnosed meningitis; nephritis; and other troubles by attendant physicians. The boy evidently had latent pneumonia and his recovery was retarded by strong medicines, as he was obstinately constipated all through his illness. Would the above cases have terminated in tuberculosis under old school treatment?

* * *

Woman; middle age; has been treated three months for blurred vision, during all of this time she has had almost daily applications of atrophia. Symptoms:

Blurred vision; worse in morning and afternoon.

As if smoke before eyes all the time.

Pupils immobile.

Exertion of vision aggravates.

Great heaviness of eye-lids, can hardly keep them open.

Terrible weak feeling all the time.

Extreme photophobia; worse in sunlight, hard to wear colored glasses even indoors.

Two doses of *gelsemium*, 10,000, allowing full duration of action, cured promptly. No return in two years. Did the doctor who applied the atrophia know he was doing injury, or was he grafting or both?

(Begin the repertory, Kent's work under Blurred Vision.)

DR. S. J. HENDERSON, *Bad Axe, Mich.*

CONTRIBUTED

LETTER FROM DR. FISHER.

TO THE CRITIQUE: Just in from New York, I note your disapproval of my suggestion of Dr. Kinley for the presidency of the American Institute, and regret that THE CRITIQUE is not disposed to lay aside its personal antagonisms for the good of a cause common between us. I am led by twenty years' acquaintance with Dr. Kinley to believe he would make us a good president, and feel quite sure he would not, consciously or unconsciously, allow himself to drag the Institute along in the same old rut.

However, perhaps there is less likelihood of Dr. Kinley's election, as you suggest, than if I had not forgot to consult the Bailey-Royal-Dewey promoters of Institute affairs. Yet there comes times in the history of men and associations when justice and equity assert themselves, and there are indications over the country, as at the meetings of the Institute, that it may soon be no longer necessary to seek the benediction of the "Established Saints." To illustrate: Rochester has near an hundred homeopaths and near three hundred homeopathic hospital beds, yet not one homeopath from Rochester was at Kansas City; Buffalo has half a hundred homeopaths and is building a two hundred thousand dollar homeopathic hospital, yet not one homeopath from Buffalo was at Kansas City; Washington didn't even send the usual Dr. Custis; Baltimore had not one there; Boston sent but three; Detroit, with sixty and the next meeting had but one, if any; San Francisco was without representation*; Minneapolis had but two; St. Paul none; Indianapolis was without a delegate; Cincinnati sent only Dr. Walton, Nobody was present from Coi-umbus, Albany, Milwaukee, Portland or Seattle; Philadelphia had but one and New York but two or three, and so it goes.

But will it always be thus?

What is the matter, if not disaffection with the management? This is exactly the way a former regular attendant and former official who for a quarter of a century was one of the most regu-

*Beg Pardon, Dr. McConkey was there.—Ed.

lar and delighted attendants put it to me in Michigan recently, and it is the way scores have expressed themselves within recent years. From one end of the country to the other there is either indifference or disgust. The State Societies are having good meetings everywhere, but the Poor Old Institute drags along with only now and then a meeting worth attending, with decreasing interest and numbers, and with a general lethargy toward it. "How long, My Soul, oh how long, shall this order be allowed to continue?" is not a far-ery from the plebeian Institututer!

It will no doubt please THE CRITIQUE, with whom I am already charged with being hand-in-glove against the Powers-that-Be, to know that besides Dr. Kinley there are already in the field for the presidency at Detroit Drs. Hinsdale, Carmichael, Horner, Ward, possibly, and Sawyer; the latter being groomed by the Saints as the "official candidate" of the set. Dr. Kinley's name has been well received, and may be linked with one of the others in the race. Should his state come up solid for him for the first place he would be a formidable candidate. But it is refreshing to know that it will not be necessary to depend upon the candidacy of any one man in order to select a man well suited to the office. As I understand it, in Dr. Kinley's case it is not so much himself for the office itself as for the good of the majority of the Institute. Likewise with some of the others named, they are standing for the office for the good of the cause rather than that they are candidates of, for and by themselves. It augurs well for the Institute, no matter which one of two or three may be chosen.

C. E. FISHER.

February 15, 1909.

COMMUNICATION FROM DR. HAYES.

EDITOR OF THE CRITIQUE: I was glad to read in the February number of THE CRITIQUE, Dr. Newton's "correction" of my criticism of Dr. Loos' statement that Kent's Repertory "includes all of value in repertorial forms in preceding repertories, general and special, all that could be gleaned of reliable symptomatology in the Guiding Symptoms, etc., " for I have been afraid that my criticism might seem, though it was not in-

tended to be, unjust. I feared that if some should read it who were not acquainted with the work that they might form a wrong opinion of its real value. I began to use Kent's Repertory seven years ago and I have used it every day since, I believe, except during the short times that I have been away from my practice. I have valued it so highly that I bought a copy of the new edition as soon as I knew it had come out for the sake of having the fifty additional pages although that entailed considerable labor in copying notes from the old edition. I would advise every doctor who wishes to apply Homeopathy easily and satisfactorily to get a copy of this work and use it.

But that it is a very efficent instrument with which to select the curative remedy need not make one blind to omissions or imperfections. I have been glad to find in the course of my copying that many omissions have been supplied. I was also glad to see that few, if any additions have been made from those hypothetical provings which have been coming out in THE CRITIQUE.

As to whether this repertory "includes all of value in repertorial forms in the preceding repertoires and all that could be gleaned of reliable symptomology in the Guiding Symptoms," or, whether there are many omissions, many of them important (not referring to clinical symptoms of doubtful value), that question I am willing to leave with those who make those books their constant companions.

As to Dr. Newton's assertion that the rubrics I mentioned were not generals I would say that I have sometimes had patients who seemed to be affected in a general way by stooping, sitting erect, sitting bent, etc. Last week I had a patient who had these symptoms from sitting erect:

Tenderness of eyes; eyes sensitave to light; pain in eyes extending to temples. Throbbing in temples. Faint sensation in head; faint sensation in stomach. Cold, clammy feet.

These symptoms were absent while lying or sitting slightly inclined or while in motion. Sitting erect was impossible for any length of time. Was not "sitting erect" a general in this case?

Speaking of "generals," what kind of duty is causticum and other remedies in smallest type doing under the general rubric, "Motion," for instance? Do causticum patients say they are

worse from motion? To illustrate, let us parallel causticum and Motion with silica and Stooping:

Stooping—Silica.

Causticum—Motion.

Vertigo	Pain in stomach and abdomen
Headache		Pain in shoulder joints
Jerking in forehead		Pain in glands
Dyspnoea		Pain in back
Pain in back		Pain in legs and feet
Pain in spine		
Bruised sensation		

Is "Motion" more of a general of causticum than "Stooping" is of silica?

Again, if "Granulation" is not a general why are "Abscess" "Burns" "Contraction," "Thrombosis," "Prickling externally," etc., classified in Kent's Repertory as "Generals?"

It is my humble opinion that there may be some problems in repertory making not yet completely solved.

ROYAL E. S. HAYES.

Farmington, Conn., Feb. 14, 1909.

**SHALL THE MEDICAL PROFESSION, IN CONJUNCTION WITH
THE BETTER OPTICIANS, OR THE FAKING OPTICIANS,
DETERMINE WHO SHALL FIT GLASSES?**

DEAR DOCTOR: There have been introduced into the legislature two bills to regulate the practice of fitting glasses to the eyes.

One by the opticians, House Bill No. 552, Senate Bill No. 384, to establish optometry as a profession. This bill provides for a separate board of examiners, its members to be appointed by the Governor, from the ranks of refracting opticians, who shall determine the fitness of the individual to test the eyes, and license those found competent. This bill also provides for the exemption from examination of all who have been in the business of fitting glasses for three years, irrespective of their work or fitness.

The other bill, known as House Bill No. 616, Senate Bill No. 334, introduced by the medical profession, provides that the license to measure or refract the eyes and fit glasses and spectacles to the eyes of human beings shall be granted by the State Board of Medical Examiners. For the purpose of examination

of applicants the board shall appoint two oculists, each of whom shall possess a license to practice medicine in the state, and three practical opticians of acknowledged skill and repute. You will note that this bill recognizes both the oculist and the legitimate optician.

No exemptions are provided; but the board may license without examination where the committee recommends favorably upon the credentials relating to experience and qualifications of the applicant.

It provides that "nothing in this act shall be construed to apply to persons licensed to practice medicine in this state, nor to give any person holding a license under this Act the right to attach the title of M.D., surgeon, doctor, physician, eye-specialist, doctor of optics, doctor of refraction, doctor of ophthalmology, doctor of optometry, or any word or abbreviation to his name indicating that he is engaged in the treatment or diagnosis of the diseases or injuries of the human eye, nor to use drugs or medicines in any form for the treatment or examination of the human eye, nor shall this Act apply to persons who engage in the sale of eye-glasses and spectacles without measuring and refracting the eyes."

The expenses of the Act shall be met from the fees and fines collected under the Act.

The second bill has been introduced by representative physicians, not because they believe there is crying need of any legislation on the subject, but in order to meet a determined effort on the part of opticians to gain professional standing as "Optometrists" or "Doctors of Optometry" by legislative enactment, without the training entitling them to professional recognition. This second bill has been introduced upon the theory that the only plausible reason for any legislation upon the subject is the protection of the public health against incompetent, quasi-professional persons. It is a well recognized principle that matters of public health are best understood and administered by the medical profession.

So long as the state does not assume responsibility by means of a license to the refractionist, relatively small damage is done by incompetent men fitting glasses. If, however, the state determines to stand sponsor for the legitimacy of the work done it would seem eminently fitting that the power to license be placed where public health can be most efficiently guarded. This place, in Colorado, is pre-eminently with the State Board of Medical

Examiners, with its long experience and the legal machinery to make its action effective, as provided in House Bill No. 616.

The better class of opticians, those who are capable of doing good refracting, are largely in favor of the physicians' bill. Those who have earned no right to professional recognition, who have had no adequate training; the graduates of fake optical schools who receive diplomas with the degrees of "Doctor of Refraction," "Doctor of Optics," "Doctor of Optometry," etc., after eight days to six weeks' attendance or correspondence, will all be against the physicians' bill, for the evident reason that financial gain, not public health, is their sole and only object.

The medical profession has persistently worked for laws which will protect the public from impostors and charlatans, and has never asked for any kind of legislation which has been mercenary or for its own aggrandizement.

It stands ready now to help the opticians protect the public against imposition, but it cannot support them in special legislation which is intended only to help themselves.

We therefore most respectfully beg your active support of House Bill No. 616, Senate Bill No. 334, and likewise your opposition to House Bill No. 552, Senate Bill No. 384.

We are informed that some opticians are circulating petitions among physicians for signatures. Above all, please do not commit yourself to a policy so out of harmony with your own high calling.

Fraternally yours,

DAVID H. COOVER, M.D.,

First Vice President (Acting President) Colorado State Medical Society.

MELVILLE BLACK, M.D.,

Secretary Colorado State Medical Society.

EDMUND W. STEVENS, M.D.,

President Medical Society of the City and County of Denver.

CARL G. PARSONS, M.D.,

Secretary Medical Society of the City and County of Denver.

GEORGE B. PACKARD, M.D.,

President of Colorado State Board of Medical Examiners.

S. D. VAN METER, M.D.,

Secretary-Treasurer of Colorado State Board of Medical Examiners.

DAVID A. STRICKLER, M.D.,

Chairman of Executive Committee of the Colorado Ophthalmological Society.

GEORGE F. LIBBY, M.D.,

*Secretary of Colorado Ophthalmological Society.
Denver, February 12, 1909.*

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All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

I AM ALWAYS GLAD to give as much publicity to any statement the "other fellow" may desire to make in refutation to any announcement of my own, as was given to the original article, and for this reason I take great pleasure in presenting Dr. Royal E. S. Hayes' affirmation, which follows: "By the way, you were misinformed as to the alleged 'cutting out' of Dr. Holloway's paper

by Dr. King. It was referred to the publicity committee by the association. Without conferring with each other we voted *unanimously* against reprinting it, so that the responsibility rests on us and not on Dr. King. It was for no reasons derogatory to Dr. Holloway, or his paper, so far as I know. (Signed) R. H."

M.

* * * *

ALL those who may be anxious to acquire reliable information regarding "internal vaccination," and many such have solicited me during the past year for data published in these pages, I would suggest that they secure the pamphlet issued recently by Dr. John Henry Clark, 12 Warwick Lane, London, England, which embodies most of the material furnished in Dr. Eton's essay in the Iowa controversy. Dr. Clark's paper was read before the Cooper Club, October 8th, 1908, and was his presidential address to that organization; it covers the ground most acceptably and will prove of interest and value to those contemplating a contest with local school and health boards.

Dr. Clarke is not an anti-vaccinationist. Touching on this topic he says: "The anti-vaccinationists are deserving of the very highest credit for the work they have done in securing individual liberty. But the weak point of their position is that it is based on a negative. They maintain that vaccination does *not* protect from small pox. Therein I think they are wrong. They also maintain that vaccination, as it is ordinarily performed, *does* injure the person vaccinated. Therein I have not the slightest doubt they are right."

The up-to-the-minute homeopath who believes in his remedies is not, as a rule, an anti-vaccinationist, but is willing to wager a slight portion of his worldly wealth that "internal vaccination" will accomplish as much good and provide better protection to those exposed to this disease, besides eliminating the possibility of bad after-results, such as quite frequently follow the "old way."

Inasmuch as I have been obliged to write many letters during the past year setting forth my inability to furnish Dr. Linn's articles, I take this method of advising any of my readers who

may feel in need of this literature to secure the foregoing as an exceedingly appropriate and reliable substitute. M.

* * * *

I AM PRINTING in this issue a communication from Dr. C. E. Fisher, *re* the candidacy of Dr. J. B. Kinley for the position of President of the A. I. H., in which he expresses a regret that THE CRITIQUE is not disposed to lay aside its personal antagonism "for the good of the cause common between us."

The good doctor goes on to say: "I am led by twenty years' acquaintance with Dr. Kinley to believe he would make us a good president, and feel quite sure he would not, consciously or unconsciously, allow himself to drag the Institute along in the same old rut."

Not having been honored by so extended an acquaintance with the gentleman in question, I may be pardoned for saying that even were I possessed of the privilege of making such a claim two-fold, that my personal opinion of the pleasure might not be in any way heightened thereby. When I take into consideration the fact that, under his guidance, or with his co-operation at least, two institutions in Colorado bearing distinctive Homeopathic titles have been wiped out of existence; that the college is neither homeopathic, eclectic nor old-school, but that it is all things to all men; that the hospital has laid aside the name under which it was incorporated and is known no more as a homeopathic institution, it requires a much more elastic enthusiasm than I possess to encourage even the faintest glimmer of an idea that the American Institute of Homeopathy would be benefitted by any such chief executive officer.

Taking the two trifling coincidences just mentioned into consideration, it is not hard to imagine, were he honored by election to this most honorable and much sought-for position within the gift of homeopathy, that one of his first acts of reform would be to eliminate this word from the title of the organization?

Now that is about all there is to the "personal antagonism" of THE CRITIQUE towards Dr. J. B. Kinley. Whatever opposition we may manifest is not on account of any personal ill feeling or disregard of his high standing in this community; if,

however, I am to consider the "good of the majority of the institute," and the cause of Homeopathy in general, in selecting a suitable person to represent both, I must ask the privilege of proposing some one more loyal to local homeopathic conditions, before I do much boosting towards advancing him to a more exalted position.

M.

* * * *

BROTHER HUNTOON on the *Iowa Homeopathic Journal* takes occasion to say in the February issue of his journal that "Our friend Mastin of THE CRITIQUE is inclined to criticise the *Journal of the American Institute of Homeopathy* before it has had a chance to make a showing." and furthermore advises me to "hold on a while" and "give the new journal a chance."

I beg the distinguished gentleman's indulgence while I assert that I have never *criticised* the aforesaid journal insofar as that publication is concerned, for no one could ever find fault with either the *Medical Century* or its immediate successor. What I have hinted at as being a little on the order of a bungo game was the manner in which the matter was manipulated by the committee in charge of the *establishment* of a journal to represent the American Institute.

There is no more reason why *Medical Century* should have been selected to step down and out than that the *Iowa Homeopathic Journal*, or any other publication, should have been subsidized. If the committee had had the good of the entire profession genuinely at heart and considered it to the best interests of all to merely have some journal *change its name* why was it that no other Homeopathic publication was permitted to bid for the service?

Insofar as any of the publications which were not solicited to take a chance in the lottery being able to do the work is concerned, inasmuch as it is merely a matter of mechanical dexterity, that need not cause comment; but the merest tyro in such matters should have been able to provide a means for publishing the entire output of the American Institute without resorting to the expensive and wholly unnecessary makeshift proposed by the Publication Committee to provide publicity for the business trans-

actions and other data, which calls for a separate volume similar to the old "transactions."

So far as the literary labor connected with the enterprise is concerned, one has only to give the *Journal*, as it appears at the present time, a very casual review to observe that the editorial work connected therewith is neither complicated nor arduous, and while a page or two dedicated to the nice things that people write to editors concerning their productions is nothing either new or novel, if each individual member of the guild would take notice of the criticisms of an adverse nature that are constantly coming in, there is no question but what a more extensive consignment of space would be necessary.

Dr. A. M. Linn, in closing a notice of the new venture in the editorial section of the *Iowa Homeopathic Journal*, strikes a very soft note when he intimates that "it would have been better had the Journal committee provided a censorship over the advertisements published within the covers of the *Journal*. Not all who read it will accept the disclaimer of the Institute for responsibility."

This is a mere love tap compared with some of the jolts that will come from individual members, but, as I have troubles of my own, I will not work up any wild-eyed individual's war-like disposition by referring to this feature for future torment which is in store for the *Journal of the American Institute of Homeopathy* in such profuse abundance as to be quite noticeable even at this early date.

M.

CIMICIFUGA Racemosa in Pleurisy and Rheumatism.—This is a very useful remedy in pleurisy after the alternate administration of aconite and bryonia. It is one of the best remedies we possess for lumbago and in spinal myalgia, when there is soreness, pain and a feeling of tenderness along the spinal column. It is effectual in both muscular and articular rheumatism, but its action is most pronounced in those cases in which the left side is most affected.—FREDERICK KOPP, in the *Homeopathic World*. November 2, 1908.

o	Miscellaneous Matter	o
Send Us a Personal Item Occasionally		

Mr. James Henry is president of the Denver Homeopathic Pharmacy Company, 735 Fifteenth street.

* * *

Dr. C. E. Tennant is one of the associate editors of the Denver Medical Times and Utah Medical Journal.

* * *

Dr. Elizabeth Cassidy has been appointed one of the county physicians by the Democratic board of county commissioners. More power to the dems.

* * *

"We need in Colorado staunch supporters of the faith of Hahnemann," is the wail of one who should know all about it. S-s-s-h; don't give it away.

* * *

William Fitzhugh, engraver for A. J. Stark, jeweler, was divorced from Mrs. Julia D. Fitzhugh, a physician, by Judge Dixon. She went to Chicago and forgot to return.—News, February 6, 1909.

* * *

Denver's summer sunshine during the forepart of last month, when other localities were slumbering under a mantle of snow, makes one feel that this is a pretty good place to be at—especially in winter time.

* * *

A Denver doctor who had three ribs broken in a recent street car collision, repaired his own hurts after having cared for several seriously injured individuals. This is much more on the heroic order than ordinarily.

* * *

"The Conspiracy Against the Public Health," is a recent product of the printer's art which refers quite frequently if not always favorably to the American Medical Association. H. M. Wilcoxon appears to be the author.

* * *

Many distinguished members of the medical profession paid glowing tribute to the high character of the late Dr H. C. Allen, in the February number of **Medical Advance**. A very life-like likeness of the doctor was published in the same number.

Dr. F. E. McCurtain, detail man for the Borden Malted Milk, returned to Denver recently from a trip to the Pacific coast in the interests of his product, and was a welcome caller at this office. Dr. Mc. does not show a disposition to get thin over his work.

* * *

Detail men and others who have a most excellent opportunity to observe matters in general, say that the average physician has found it extremely "quiet" since the new year began. Denver, then, is no particular exception to this extremely unpleasant situation.

* * *

An undertaking firm at Grand Junction, Colorado, has contracted to bury paupers of Mesa county at the rate of one-millionth of a cent for each body. There is some satisfaction in being poor, inasmuch as funeral expenses for all such appear abnormally reasonable.

* * *

"The Erie Street Medical College, 1848-1849" is the title of a very tastily gotten up pamphlet, gotten out by the Cleveland, Ohio, Homeopathic Medical College. It contained the address by Dr. David Herrick Beckwith delivered before the Cleveland Medical Library Association at its annual meeting.

* * *

The many friends of Dr. Walter Wesselhoeft will celebrate the fiftieth anniversary of his graduation the 3rd of this month. A loving cup will be among the material evidences of their love and esteem for this very lovable man. **The Critique** hopes he may round out many more years in the service he so ably represents.

* * *

Fort Wayne, Ind., Feb. 5.—Dr. Herman G. Nierman, thirty-eight, died today following an operation recently performed at his direction to prove a theory that the removal of the colon would make one immune from most diseases. As he was locally diseased in the colon, he decided to experiment on himself to prove his theory.—Express.

* * *

At a meeting of the Regents of the University of Michigan, held January 11th, two hundred and fifty dollars were set aside to be used by the faculty towards entertaining such members of the American Institute which meets at Detroit, Mich., in June, as may care to visit Ann Arbor. This will be a drawing card for the A. I. H., especially among the alumni of this institution.

* * *

The daily papers told, during the early part of last month, of the grafting of a dead man's leg on a living subject by eminent surgeons

of a certain eastern city, and of the successful outcome of the operation. Inasmuch as there are many forms of graft we await further reports for confirmation of our doubts as to whether the one referred to was the principal one in this particular case.

* * *

Three new members of the state board of health were appointed by Governor Shafrroth the 1st of last month. They are Dr. Paul S. Hunter of Denver, Dr. Crum Epler of Pueblo and Dr. D. F. Wooding of Denver. They are appointed for six years and succeed Dr. W. H. Davis of Denver, who was president of the board; Dr. F. N. Carrier of Canon City and Dr. J. Tracy Melvin of Saguache county.

* * *

The Union Pacific Railway has issued a very attractive folder which gives unlimited information concerning the Alaska-Yukon-Pacific Exposition, which opens at Seattle in June of the present year. The Union Pacific is always up-to-the-minute in all modern contrivances calculated to insure the safety and comfort of its patrons and will, no doubt, carry thousands to this show, with its customary consideration of detail.

* * *

At the February meeting of the Denver Homeopathic Club Dr. Joseph B. Kinley talked about "Homeopathy and Politics," while Dr. Harley K. Dunkley spoke concerning "Homeopathy and the Newer Cults." Taking the postal announcement of the secretary as authority we are here to declare that "the efforts to rejuvenate the club have been entirely successful." This is certainly pleasing news to those interested in the cause in Colorado. Selah.

* * *

Colorado law makers have been called upon to frame up a law whose supposed purpose is to protect the dear public from "bad surgery." Among the promoters are several surgeons who have done about as much bad work of this sort as should be credited to any one individual, if malpractice suits are any criterion. The one who yells "stop thief" the loudest is usually the one to be considered in making a quick stop of the right party.

* * *

The Critique was in error in stating in its last issue that Dr. C. E. Fisher is located at Sterling, Colorado. The doctor has a ranch there and has his family and his son's family thereon, because of the illness of his son's wife with tuberculosis. The doctor remains chief surgeon of MacArthur Brothers Company, with headquarters at 810 Fisher

building, Chicago, and 1510 Hanover Bank building, New York. He has spent a good part of the winter on his ranch, but will henceforth be in New York.

* * *

The Southern Medical Association, twenty-fifth session, presented a program at its meeting, the 24th, 25th and 26th of last month that would have been a credit to the American Institute. Both Drs. Hutton, the president, and Dr. Harper, the secretary, deserve the highest commendation for their untiring efforts, to which much of the success of the meeting was due. Many distinguished members of the profession were present and the program was one of much merit and most thoroughly appreciated by all.

* * *

The January edition of **Chironian** was a "special college number" devoted to the reporting of doings at the banquet tendered Dean Copeland, at the Astor House, New York, December 4, 1908. A striking likeness of the Dean is also published in this number, which, with the other contents, make it a product of the press to be preserved by the loyal alumni of this old established institution. Dean Copeland is making good in his new position, as has been his habit no matter where placed.

* * *

The Homeopathic World, London, England, has this to say, in a preliminary notice, of the new edition of "Kent:" "This, the greatest of our Repertories in every sense, has established itself in favor very quickly. Its worth has more than compensated for the preliminary difficulties of mastering its scheme, and the appearance of this second edition proclaims the extension of the demand for it. Dr. Kent has made various corrections of detail, but the scheme is unchanged. Our only complaint is against the issue of the work in one huge volume. It would be so much more easily handled if divided into, say, three parts. Whatever its form, however, no homeopathist can dispense with it."

* * *

We wonder who the broad browed contributor to the **Journal of the American Institute of Homeopathy** was hitting at in Colorado Springs when he said "there have been three physicians in that city but they have been failures for the reason that they have not been distinctive Homopaths, and the people want one thing or the other." Coming as this does from a member of the faculty of a college which is neither homeopathic, eclectic nor allopathic it is quite likely that the ranks of the Springs, contingent will have to be recruited from some source separate from the college of which this self-constituted

champion is a glowing representative. **The Critique** is mighty glad that Drs. Foust and Allen are still "carrying the banner" in that benighted town.

* * *

St. Patrick's day is to be a memorable one in the history of homeopathy in England. On that anniversary the Lord Mayor of London and the Lady Mayoress, Sir George and Lady Truscott, offer the hospitality of Mansion House to the homeopathic cause; so says **The Homeopathic World**, London, England, in its February issue. According to the same authority the object of this meeting, which is an advisory one, is to consider how Homeopathy can best be made an endowed state servant and established as a great state interest. Lord Truscott, unlike Colorado aspirants for high office, has not permitted the duties of office and the cares of state to outweigh the claims of a cause which he espoused in unofficial days. **The Critique** congratulates its English brethren upon this most excellent opportunity to advance the cause of Hahnemann in the tight little isle, and trusts that all took advantage thereof to be present and aid in the good work.

* * *

It is with great pleasure that the North American announces the consent of Dr. Rudolph F. Rabe to join its editorial staff and to take charge of the department of the Journal devoted to homeopathic materia medica and therapeutics under the title of "International Homeopathic Review." Dr. Rabe needs no introduction to the North American homeopathic practitioner, although one of the younger members of the profession, he has already made his mark—witness his selection for the chairmanship of the bureau of materia medica of the American Institute of Homeopathy last year, his election to the presidency of the International Hahnemannian Association, and his present appointment as head of the department of materia medica at the New York Homeopathic Medical College. It is Dr. Rabe's intention to include in his department reprints of articles which have appeared in foreign or out-of-print journals, summaries of articles in current homeopathic literature, and such observations and hints from his own pen as he believes will be helpful to and appreciated by the readers of the North American.
—N. A. J. Homeopathy.

* * *

The Democratic members of the board of county commissioners of Denver city and county, have broken away from the usual custom and appointed several physicians to represent the homeopathic school on the staff of the county hospital. The following is the official list: Homeopathic Medicine, Dr. Carl D. Fisher, Dr. Charles M. Worth, Dr. Otto S. Vinland, Dr. James B. Brown. Consultant in Medicine, Dr. James P. Willard. Surgery, Dr. Clinton Enos. Gynecology, Dr. John

W. Harris. Obstetrics, Dr. John G. Locke, Dr. Margaret H. Beeler. Diseases of the Ear, Nose and Throat, Dr. David A. Strickler. Mental and Nervous Diseases, Dr. Ambrose C. Stewart. With the above appointments that beautiful chestnut "that the proper proportion of cases in the different departments will be assigned in the order of their admission" has also been sprung on the public at large; "more for publication purposes than an evidence of good faith," if past performances are to be taken into consideration. In spite of tremendous opposition Dr. J. B. Kinley was appointed a member of the supervising board of the county hospital. **The Critique** hopes that all fond expectations of the new appointees will be fully realized.

* * *

Professional women, especially those in the medical market, feel highly elated over recognition accorded them by the county commissioners. One of their number has been appointed county physician, and quite a few have been honored with appointments on the county hospital staff. Dr. Margaret Hofer Beeler, graduate of the Denver Homeopathic Medical College when that institution was not afraid to acknowledge the name, was one of the appointees and **The Critique** takes great pleasure in chronicling the fact. A banquet was indulged in by many professional women at the Brown Palace hotel, Saturday evening, February 6th, at which time much pleasure was expressed that the democratic county commissioners had kept their promise to recognize the ladies in their appointments of county physicians and members of the county hospital staff. On this occasion Mrs. Catherine Cook responded to the toast "Homeopaths" and Dr. Beeler, "Embryo Efforts." At the conclusion of the gab and grubfest the following resolutions were unanimously adopted:

"Whereas, The Democratic members of the board of county commissioners of the city and county of Denver, John G. Prinzing, William P. Quarterman and Thomas Henry, have appointed as members of the county medical force, a woman county physician and seven members of the hospital staff, now therefore be it

"Resolved, That we, the members of the Professional Women's Club of Denver, express our hearty appreciation of their courtesy and fairness in giving equal recognition to woman practitioners.

"Resolved, That a copy of this resolution be spread upon the records of the club and copies be sent to Prinzing, Quarterman and Henry."

READING NOTICES

Of Interest to Everybody

CATAPLASM OF KAOLIN.—Probably no preparation of the Pharmacopoeia has received as much attention from pharmacists as the cataplasma of kaolin. As yet there seems to be no one who has been able to so manipulate the official formula for it as to produce a satisfactory product. I have before me extracts from papers on it, written by six different men eminent in pharmacy, and no two of them agree on a plan of procedure and only one is of the opinion that the Pharmacopoeia is right.—Abstracted from the Druggists' Circular.

It is a matter of small moment whether or not pharmacists can make this preparation, as it is at best but a poor imitation of Antiphlogistine, for which it is recommended as a substitute. Up to date no one has successfully imitated a \$20 gold piece and the same may be said of Antiphlogistine. As long as the Denver Chemical Manufacturing Company maintains the high standard it has set for its product there will be little necessity for the druggist to worry over methods of manufacturing Cataplasm of Kaolin. Ed.—Paul Caldwell.

POST-GRIPPAL COMPLICATIONS.—If there is one particular feature which characterizes the genuine influenzal attack, it is the decided and sometimes intense prostration that remains after the subsidence of the acute symptoms of the disease. This general vital "set back" is oftentimes entirely out of proportion to the severity of the original grippal attack, and the most robust patients are sometimes the most severely prostrated. In addition to the general devitalization, La Grippe is extremely likely to be accompanied with or followed by such troublesome complications as otitis, neuritis, sinus inflammation, gastro-intestinal derangements, resistant and obstinate bronchial catarrhs, and, more dangerous than all, a peculiar, more or less characteristic, asthenic, form of lobular pneumonia. The skill of the physician and the vital resistance of the patient are often taxed to the ut-

most in a combined effort to induce final recovery. Anemia, to some degree, is almost always brought about by the combined devitalizing power of the disease and its complications, and convalescence is likely to be tardy and tedious. An easily borne, readily assimilable hematinic does much to hasten recovery and Pepto-Mangan (Gude) is an especially eligible method of introducing the much needed ferric and manganic elements, without producing or increasing digestive difficulty. In no condition does this well tried hematic remedy evidence its undoubted reconstructive power more certainly than in the treatment of post-grippal convalescence.

ETIOLOGY AND TREATMENT OF NEURALGIA FROM A CLINICAL STANDPOINT.—John S. Moreman, M. D., in writing under the above title says: In general terms, I may say, neuralgia is the outgrowth of any disease process which tends to diminish the vital forces, and to deprive the tissues of an adequate supply of nourishment, or such nourishment as is necessary to keep the tissues adequately in repair. When the tissues are inadequately nourished, their vigor and power of resistance is lost, and the establishment of neuralgia may supervene at any time. We may expect to see neuralgia proceed from a lowered physical power incident upon constitutional syphilis and also upon exposure to malarial infection. In fact, malarial influence is a most potent factor in the production of neuralgia.

The treatment of neuralgia comprehends local applications of various kinds, the administration of remedies for the removal of the cause, remedies for the relief of the pain, and the application of certain surgical measures looking toward the removal of tumors, or any other growth upon which the neuralgia may depend. I employ opium now only when the pain is so intense that death is imminent from its effects. Opium and its alkaloids are supplanted now in my hands by anti-kamnia tablets which relieve speedily and carry no disagreeable after effects. When malaria is the cause we will have to depend on quinine, which we can give in combination with antikamnia in the form of anti-kamnia and quinine tablets, each tablet containing $2\frac{1}{2}$ grains anti-kamnia and $2\frac{1}{2}$ grains sulph. quinine.

VOL.
XVI

ORIGINAL ARTICLE

No.
4

Denver, Colorado, April 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

DIFFICULT CASES FOR REPERTORY WORK.

Julia C. Loos, M.D., H.M.

GIVEN the record of a case properly taken, with complete investigation of complaints willingly revealed, there is always necessary a large measure of care in selecting the rubries most expressive of the disordered individual and their use for repertory study. The student requires most careful and extended training for repertory use for the best of these. There are many patients, however, before whom it would appear that even homeopathy must retire, vanquished, because of various difficulties. The prescriber who has benefited those who have appealed in vain to other forms of treatment is apt to encounter the most difficult cases, for the people are learning or have learned to expect vastly more from homeopathy than from the less scientific forms of medical treatment. Of him, to whom much is given shall be much required. Many cases that prove entirely unresponsive to other medical treatment, appear to the thoroughly trained homeopath as easy problems because of the evident resemblance to familiar remedies. But others are presented that are clearly difficult cases for good prescribers. Of what use is the repertory in these cases?

CASE I. Mrs. R. is one of those who demonstrates that success in homeopathy is not based on the faith of the patient, regardless of remedies prescribed. She was thoroughly confident that homeopathy should lead her to strength and vigor. She expected more homeopathy than her physician presumed to promise. With all this confidence, through months of reporting, she returned always with no steady improvement. Being of a nature to treat lightly many discomforts in daily affairs and carry her plans in spite of personal inconvenience and discomforts, she disregarded the small, varying items of disorder, common disturbances from effects of cold, over exertion, etc. In the thought of the physician, she represented the unsatisfactory, difficult patient, whose appearance aroused no waves of professional pride

of achievement. When, therefore, after considerable work, she came, after two weeks' absence, declaring unequivocally and without urging, that she was really improved and stronger, there was joy over the returning wanderer (from health).

One difficulty with this active patient, never sick enough to be in bed, was the scant list of symptoms. One eventful day, we took time to record all possible details, repertory at hand, using its rubrics as a guide in addition to points previously reported. Her chief complaints included steadily increasing weakness of memory; emaciation; lack of appetite and general evidence of ageing; wrinkled skin; relaxation which makes sitting erect difficult; irritability, impatience and tendency to assume an entirely incorrect view; rather censorious of everything and everyone, instead of the usual calm alertness even to age of sixty.

Extended search was rewarded by addition of pressure and discomfort in the head; pressure on eyes as if they bulged, with pulsation in the eyes; fluttering and irregular action of the heart, weakness of heart; inclination to recline; sensation stiffness in joints and back of neck; intermittent pains in hypochondria (assumed to be in liver and spleen); yellow skin; lack of self-confidence, mistrusts her judgments; mood changeable; startled by sudden noises; persistent thoughts; sense of helplessness; aggravation from hurry; hoarse from mucus in larynx; weak memory for words while speaking; of dates; of what was about to do; of what has done (must return to reassure herself that things have been done);* of what has heard; of occurrences of the day; of persons; of what she was about to say or write and what she thought. Uses incorrect words.

To the student of trend of symptoms, here is evidence of some serious manifestation in the head, perhaps in heart and liver; failing functions, steadily increasing. Selecting the symptoms expressive of the mental condition and the system, we have —disposition to recline; yellow skin; aggravation from hurry; lack of self-confidence; emaciation; weak memory; heart fluttering; pain in heart; face wrinkled.

By the process of elimination these rubrics offer for consideration arsenicum, calcarea ost., lycopodium, mercurius sol, na-

*A grandchild under treatment has evidence of transmitted sycosis.

trum mur., opium, with lachesis, sepia, nux vomica and sulphur, except in the last two. Adding to these pains in liver and spleen; sensation of fullness in eyes we have natrum mur., and lachesis in the lead. Comparison of the case with the two remedies leads to selection of natrum mur.

The prescription of this remedy is 20m potency started the change in the patient which led to her declaration of improvement. A dose of ignatia once and use of natrum mur., on two later occasions proved beneficial and enabled her to perform a long seige of nursing in addition to usual occupations. The development of this disorder to the point where a definite diagnosis of serious anatomical pathology can be made has been postponed.

* * *

CASE II.—After Miss S. W. was obliged to discontinue teaching, at sixty-four years of age, on account of nervous debility, she was under homeopathic treatment. Her various disorders included many functional derangements in nearly all of which she experienced decided improvement but as one group of symptoms improved there was usually another to replace it. Paroxysms of nervous collapse frequently kept her in bed for days, from sheer weakness and sadness; complaints from thunder-storms; rheumatic pains; swollen feet; liver complaints and nervous trembling; sacral paralytic pains; extending down the thighs and loss of voice were prominent in the anamnesis. Occasionally, all through life, from childhood, she suffered loss of voice from as subtle influences as the strong odor of flowers.

In January, 1907, when she had not spoken a loud word for seventeen months, in the course of studying her case, I realized that the repertory led usually to some compound of kali or to phosphorus for her symptom groups and these remedies proved beneficial for different partial images. At this point, kali phos. proving was carefully read and therein was perceived the picture of the patient, including groups of symptoms not included in any of the other remedies considered. At the time the patient was in bed, with one of her collapse paroxysms.

Within fifty-two hours after receiving kali phos. she spoke aloud and progressed generally more than she had at any time previously, first experiencing a decided homeopathic aggrava-

tion of a few hours. Yet we cannot recommend this remedy for paralytic loss of voice superior to all others. A few times the same happy result followed its use but during the past two years, on many occasions, her voice has been lost. Causticum, psorinum, mercurius sol., alumina, apis, phosphorus have been used and their use, followed by return of voice within periods varying from twelve hours to ten days when the voice has been absent for periods varying from a few hours to seven weeks, other remedies having been used during these lapses without change in this system. When the voice was restored, general improvement in health accompanied it and the voice remained from three weeks to three months.

Existing domestic and mental conditions forming the environment in this case act as hindrances to best results of prescriptions, but the patient has been vastly benefited on many occasions. The experience leading to use of kali phos., demonstrates how the repertory may point a finger for the eye of reason, when it cannot expose the exact image.

* * *

CASE III.—Rev. M. B. was first interviewed, professionally, at the age of forty-one when he considered himself in good health, being seldom hindered in daily routine of life and his profession by illness. His complete history and image of disorder were obtained only through three years' acquaintance. The chief items of that history are as follows:

In boyhood suffered measles, diphtheria and scarlatina; partial deafness resulted from the latter. Suffered quinsy at seventeen years; appendicitis at twenty-two years; typhoid fever at thirty-one years. Educated for ministry in natural gas region and at thirty-nine years of age was poisoned by gas, suffering digestive disturbance and nervous collapse. When in the pulpit, preaching, suddenly lost nerve force and fell, unable to continue the service. Has been timid about speaking from pulpit since this, the first of his preaching.

The voice becomes unaccountably weak and powerless, non-resonant, scarcely audible though speaking is painless. He describes the voice as "woolly," muffled as though passing through an absorbing passage. This recurs without warning, when weak

or nervous. After preaching, larynx has sensation of constriction or pressure from below as it has also associated with flatulent dyspepsia, aggravated after eating and when tired; ameliorated after sleep and rest. Has suffered frequent cold effects in larynx, trachea and lungs. Voice frequently husky, hoarse, rough with rough, sore sensation which gradually fades away.

Flatulence, with abdominal distention and compression of larynx ameliorated by tasteless eructations; occasional eructations of "bile." Aggravation from fat and fat-cooked foods. Wants brain food, sweets. Empty sensation, immediately after eating, followed by sensation of fullness one hour later.

Mental depression, since early manhood; averse to mental work especially when digestion is poor. Observes special care in food mastication and use of light foods morning and evening and use of physical exercise since nervous break-down. Delights in open air and long walks. Works more easily fasting; physical condition sluggish for an hour after eating. Comprehension difficult when reading. Sermon writing difficult—later impossible, depending on previously prepared sermons. The enthusiasm of the preaching hour appears to drain the vitality. Hands at times cold, at times externals warm, congested as though internals depleted.

Spine weakness after mental or physical exertion, associated with vertigo, nausea and faintness. Dorsal region, one or both sides, dull aching, aggravated after eating as though conscious of kidney activity. Lower spine aching from exertion, at times aggravated reclining, radiating in hot streaks down thighs; aggravated walking, standing, bending. Pain in sacral spine, size of silver dollar; later pain improved above and appeared more in nates, always with lack of nerve force; ameliorated temporarily by sitting with pressure against back.

Heart, rapid palpitation on first reclining; may prevent sleep.

Perspiration free on exertion; constipation tendency; eyes yellowish at times; tongue furred; painful hemorrhoids at times; sleepless for hours, on retiring, or in early morning; bladder catarrh few years ago; stream slow, almost impossible at times; delayed; constriction of urethra treated years ago by dilatation which eased it.

These symptoms were collected during two and a half years' of observation during which time the digestive disturbances were improved by sulphur and carbo veg. In February, 1908, when the mental, nervous and vocal symptoms were especially interfering with sermon writing and delivery an anamnesis was made with the following rubries:

Larynx, constriction sensation; voice, weak; hoarseness from overuse of voice; aversion to mental work; complaints from mental work; sexual passion lacking. This study revealed phosphorus and natrum mur., with slightly differing degrees of similarity. Review of the case through the entire previous record determined on the choice of phosphorus and this was administered. All symptoms were ameliorated and the patient declared himself much improved, especially in vocal difficulty. Later careful use of voice according to proper vocalization increased ease in this particular.

At length the strain of nerve tension culminated in sudden and unexpected loss of consciousness in the midst of preaching, when he fell in a faint as he had done in the early days of pulpit service. Thereafter he confessed that his nervous difficulty was largely due to timidity in the presence of people, in meeting and talking to or with them. This humiliating experience in the pulpit was followed by renewed efforts at his self control and renewed study of the case and record on my part. Comparison of natrum mur., and phosphorus led at length to comparison of the proving of the compound natrum phos. In that image was discerned the characteristic and salient points of the patient most clearly portrayed. The use of natrum phos., first in Smith-Shedd, 1m., potency and later in Skinner, 10m., potency has been accompanied by most satisfactory results; increased nutrition, ability to work and nerve force.

The last two cases were benefited by remedies not found in the repertory yet the repertory led to study of each of them. They serve to illustrate that the exact remedy is needed and not combinations of two partly similar remedies. If provings of remedies can be entered in the repertoires as rapidly as they become reliable the repertoires become by just so much increased in value. There have been various suggestions in the periodicals from time to time concerning the provings reported by Doctor J. T. Kent in

the past few years in THE CRITIQUE. Surely no careful student can read those records and imagine that they are suppositions, hypothetical in any degree, as reference is constantly made to the provers and to distinctions between the elements and their combinations as entities. Furthermore the features of the mineral compounds which are not part of either of the elements composing them could not be imagined by any sane mind and presented as provings. That would be more difficult than to conduct the provings.

Harrisburg, Pennsylvania.

THREE MATCHLESS ARGUMENTS FOR HIGH POTENCIES.

By Dr. J. C. Holloway, M.D.

IT IS my purpose to submit a few rational scientific reasons which should go to demonstrate beyond question, both to physician and patient, that high potencies of drugs—potencies containing none of their material substance, are the only true and scientific instrumentalities with which to treat and cure human maladies. This truth has long since been evident to my own mind, and thousands of times verified in daily practice; but to formulate the doctrine so as to reach the conviction of the average practitioner and his intelligent patients, is my present task. And this doctrine, when once understood, will explain to the layman why Homeopathic medicines are colorless and tasteless; why they "all look alike," and why they never offend the taste. The Homeopathic physician has nothing to lose by educating his patients. The more Homeopathic light he lets in the better patients they become. The average patient does not understand the potency question because he has had no opportunity to learn. Hence, why the medicines in the Homeopathic form should be tasteless and free from color; why they are thus *more powerful* in a curative sense, he has not been able to learn. Neither has the mongrel Homeopath who feigns homeopathy when he thinks it most popular, and resorts to allopathic methods and crude, poisonous drugs at other times. The physician who understands the potency question never resorts to old school methods, because he has no reason for doing so.

1. My first argument for high potencies, potencies which

contain no material substance, is the fact that many substances in their crude form are inert and therefore worthless as curative agents. In this list are salt, clay, tin, club moss, etc., each of which when potentized high enough has proved itself most powerful in the cure of disease. If these are more powerful when potentized than in their crude, material form, the same is true of all drugs though the increased power of the potency may not be so apparent with substances which are not wholly inert in their crude form. No Allopathic physician would have any conception of the explanation why salt in the 200th potency cured a chronic case of intermittent fever, after a mongrel had utterly failed with salt the 3X and 6X. Neither could the mongrel explain.

2. My second and stronger reason for the use of high potencies is, that outside of the domain of manual surgery, disease causes are *always* spirit-like, immaterial, morbific influences inimical to life; and the remedy, therefore, must also be spirit-like and immaterial, just such as we find in the dynamis of a drug. If disease causes consisted in something *material*, like a microbe, for instance, then reason would dictate a material redemdy. But the opposite being true, we have in that fact one of the strong and irrefutable arguments for employing medicines in their dynamic, immaterial form which we secure by Hahnemann's invention known as potentization.

3. My third and superlative argument is based upon man's dual organism and the dual organism of all medicines, whether vegetable or mineral. I lay it down as a self-evident truth that the mental entity is the "inner man" the only true reality of our existence in the higher sense. The body, the corporeal organism, is but its physical and external manifestation. Not only man, but every other animal must be considered a dual organism. The outer consisting of blood, tissue, bone, etc., is material and visable. The inner organism is immaterial and invisable, but nevertheless *an organism* as real as the external, capable of seeing, hearing, feeling, tasting and smelling; and consists of the life, soul, mind and spirit. This is the living entity within our material bodies, and is the exact counterpart of the physical structure. I believe that each living creature is formed of a dual

organism, half corporeal and half incorporeal; half material and half immaterial or spirit-like. The *life* and *mind* of every sentient being are substantial entities. They are as *real* as their flesh and blood; and while they are incorporeal and intangible as to our physical senses, they are *literal substance*, as much so as the physical organism is a corporeal, physical substance. But it does not follow that every living creature is entitled to immortality.

The real difference between man and other animals, is the difference between *reason* and *instinct*. Man is a creature capable of almost unlimited teaching, craving knowledge and possessing a capacity to teach almost without limit; but he is born without any knowledge whatsoever. On the other hand, viewing the brute creation, instinct is *born with the body*; and this thirst for knowledge which characterizes man, is absent.

A puppy pointer which never saw its mother or any other dog, if kept secluded even to old age, would, if taken to the field, instinctively stand with one foot raised and tail erect, on scenting game, as if chiseled out of marble! But keep the infant man thus secluded to old age and you would turn him loose an idiot!

Now that which inherits instinct in the lower animals, is the *inner organism*; and that which inherits the faculty to learn and the capacity to teach in man, is the *inner organism*; and that which inherits the father's likeness in the child, though its physical being is drawn almost wholly from the mother, is the *inner organism* and drawn from the *inner organism* of the father; and that which is deranged by influences inimical to life, thus producing sickness, in both man and beast, is the *inner organism*—the vital force.

Life and *mind* are the real, intrinsic, principle substance in every living creature; and by "mind" in lower animals, I mean that instinct born with the body and which takes the place of reason in man. This is what I mean by a vital and mental organism possessed in common by man and the lower animals; but there is a reason why man shall live eternally, while the most intelligent animal, like the dog, horse, or elephant can not so live. The reason is this: Lower animals can not have the slightest conception of a future life. Their stores of knowledge, by which

I mean instinct, are only suited to and limited within a temporary existence. Their vital and mental organism are suited only to the present state; adapted only to a corporeal body; and never could be made to correspond to a *spiritual body*, "a house not made with hands, eternal in the heavens," such as man is heir to. They have no conception of and no *desire* for a future life, or another body. Hence, the grand distinguishing characteristic between man and the lower animal, consists in the fact that no animal below man has or can have a conception of life after death. Man is born with an unlimited capacity for receiving instruction, though that capacity is a blank at birth; and even the heathen acquires a conception of living on forever. The scientific possibility of a future life is based upon the fact that man's mental organism has imbedded in it an indestructible desire for a life beyond death; while in the divine economy of the universe *man only* is the possessor of this desire; and this draws the distinguishing line, clean-cut and decisive, between man and the lower animal.

In keeping with this thought, the Savior of men said: "No man can come to me, except the Father who hath sent me draw him." Then He continues: "It is written in the prophets, And they shall be all taught of God. Every man therefore that hath heard, and hath learned of the Father, cometh unto me." The basic principle here affirmed is that of *teaching* and *learning*. With lower animals teaching is a blank; and learning is possible only in a very limited degree; and even that is confined wholly to the present state. No animal below man can possibly *learn* of a future state. The foregoing explains why lower animals are not entitled to immortality, though possessed, like man, of a vital and mental organism.

I have been particular as to this point, because of the large number in the medical profession who are said to be *materialists*—not only as to medicine, but as to man.

Now we advance another step. Whether in man or beast, sickness consists of a derangement of the internal organism—the vital force; and the derangement is always brought about by dynamic causes. PROOF: Take away the animating power, the vital force, the life, the soul, the inner organism, and though

every organ as a constituent part of the physical structure remains as complete as before; and though the outer organism is still exposed to material forces which are supposed to be disease causes, still *sickness is impossible*. The “I” who once grew sick has moved out, and only the house remains—only a *cadaver*.

Now it is only natural for those who think that disease is a *material thing* located in the material, physical body, caused by *material matter*, to prescribe the crude, material, outer organism of a drug in order to cure; but those who understand that disease consists in a deranged vital force; and that the vital force is the inner organism of the patient, ought to understand why we must prescribe the corresponding *inner organism*, the dynamis of the indicated remedy. All medicines, whether mineral or vegetable, possess this dual organism corresponding to the dual organism of man and beast; and the *inner organism* of the indicated medicine will cure a horse or a dog, as well as a man; but the potency must not be so high for this reason: The plane of the inner organism in the horse or dog is lower than in man, corresponding, possibly, to the potency plane of the third to the thirtieth.

Now, the fact that the inner organism of a medicine, free from and independent of its outer organism, its shell, its material matter, is more potent than when the two are given in combination, was the discovery of Samuel Hahnemann; and how to separate the two organisms of drugs by the process of potentization, thus disposing of the outer organism with its coloring matter, its taste, its killing power and its drugging effect, and retaining only the inner organism, the dynamis, the drug-spirit, the only part of a drug which contains the curative principle, was the invention of the Homeopathic founder. He affirms that the “*living organism always requires active dynamic aid*;” and speaks of “the services of the *dynamic* physician and his helpful Homeopathy.” By “*dynamic*” physician he means one who prescribes the *dynamis* or inner organism of a drug; and *only* such physician is a true Hahnemannian Homeopathist.

Now I submit that the inner organism of man is his Spirit; and the inner organism of a medicine is the drug-spirit. The inner organism of man is immaterial; and the inner organism of a drug is immaterial. The outer organism of man consists of flesh and bones; and the outer organism of a drug is its crude, material substance which give it color and taste and the power to drug the

human system, and to poison and kill. Hence, the attempt to apply the inner organism of a drug to the outer organism of man, or the outer organism of a drug to the inner organism of man, must prove most futile. Corresponding to this great truth, that the inner organism of a medicine is required to righ the vital force or inner organism of man, is that other and kindred truth, namely, that disease causes, in all cases outside of the domain of surgery, are morbid influences inimical to life; or in other words, causes wholly immaterial or spirit-like. Hence, aside from surgery, we should always employ the inner organism of drugs for the purpose of ascertaining their pathogenetic effects, and then prescribe the inner organism of the indicated remedy to cure the patient.

Now this inner organism of man, this soul, this animating power, is the "inner man" and the exact counterpart of his physical, material organism. He sees through the physical eyes and hears through the physical ears, and feels through the physical fingers. This "inner man" is organized upon a higher plan, in many instances, than the drug dynamis when merely liberated from its material substance. In such cases this dynamis must be potentized by the Hahnemannian process until the dose is strong enough and powerful enough to correspond to the plane of the inner organism of the patient to be cured. What the degree of potentization shall be for each deranged vital force, is at present wholly a matter of scientific clinical experiment. This explains why the patient who was only relieved for two weeks, three successive times, by the 3 M. was completely and permanently cured by one dose of the same drug in the 50 M. This occurred in the writer's own practice. Just as all beings do not have the same degree of animation, so the same potency of the indicated remedies can never meet the requirements of all men in order to cure; and until the animating power of each individual can be accurately estimated, the required potency must be a matter of experiment. But excepting surgery, every case of individual sickness is a derangement of the patient's internal organism and demands the internal organism of the indicated drug. In cases of very superficial sickness nature can, by the physical processes separate the outer and inner organisms and potentize and appropriate enough of the dynamis of the indicated medicine to cure, when it is prescribed in its dual form. But it is *never* necessary to thus prescribe any drug in its crude form. It is the writer's conviction that there is little danger of prescribing the *similimum* in a potency too high to cure the human patient; but the very high potency often results in a decided aggravation which could have been avoided by a somewhat lower one. I dis-

tinctly remember of having given bryonia C. M., one dose, to a young lady who was frantic with headache. I never shall forget the aggravation which preceded a beautiful cure. Had I known enough then to have given her one dose of bryonia 200 during the aggravation, I would have relieved that aggravation like magic and hastened the cure. As I have never observed a marked aggravation from the 200th, I settled down on that as my lowest potency many years ago, and since then have used nothing lower neither at the bed side nor in my office. Here, then, is the purely scientific conception which I wish to bring to the surface and stamp upon the mind of every physician who would practice Homeopathy, that aside from surgery every sickness is a deranged vital force, a disturbance of the inner organism, caused by dynamic influences; and the rational course in order to cure must consist in prescribing the inner organism of the indicated medicine, potentized until its power shall correspond to the plane of the inner organism of the patient.

My practical experience of a quarter of a century has fully confirmed Hahnemann's positive assertion when he said: "The diseases of man are not caused by any substance, any acridity, that is to say, any *disease matter*, but they are solely spirit-like (dynamic) derangements of the spirit-like power (the vital force) that animates the human body." Hahnemann himself was a long time climbing to this point of eminence, and it is not surprising that his followers do not reach it at one bound. But this is the real key to the whole situation. "The spirit-like power that animates the human body" is the *inner organism*; it is this that becomes deranged when we say, "I am sick." And that which causes such derangements is always some spirit-like, morbid influence, and *never* "*disease matter*." And the curative agent is always the inner nature or inner organism of the right medicine. However, those who have been so unfortunate as to not learn these great facts, talk about microbes, flies and mosquitoes carrying *disease matter* to healthy subjects and thus causing disease! Never! The theory is mythical and false as sin.

The foregoing thoughts are the result of a most careful study of these questions, drawn from the rich store-houses of Hahnemann, Dunham, A. Wilfred Hall and others; and I trust are sufficiently simplified to meet the comprehension and hearty approval of even the layman: for I have written the foregoing especially for THE CRITIQUE, with a view of using a reprint for the education of the general public. If it shall be conducive in confirming Homeopathic practitioners and bringing laymen to an intelligent understanding of Homeopathy, I shall be fully repaid.

Galesburg, Ill.

SPECIAL ARTICLE

***CELLULAR ENERGY VS. ETIOLOGY.**

R. del Mas, Ph.D., M.D.

POENTIAL ENERGY is stored up in the ovum; the sperm cell stimulates it, and cell-division—life results—occurs.

The energy that propels the bullet acts like that which sets the mother-cell into activity; the greater the energy stored up in the bullet traveling through space, and the lesser the resistance it meets with in its course, the farther it reaches: likewise, the greater the principle of life (kinetic energy) possessed by the fertilized ovum, and the lesser the hindrances interfering with its evolution, the healthier the body and the longer its term of health and existence.

When the first man walked on the earth, he undoubtedly was a fine specimen of beauty, health and intelligent mechanism. He had recently come out of the hands of the Creator, and was, *humanly* and *embryologically* speaking, perfect. He had not, as yet, used his will to pervert his functions, both mental and physical, and could but live long and happy, feeling within his recesses the incessant flow of the law and order whose waves came from and returned to the Eternal Ocean of Good, Life and Truth.

Then and there could man feel and realize that he, indeed, was the apogean brow of the unlimited number of active clays surrounding him. He felt he was the King of Nature, and life had an unbounded sway within his mind and body; disease was not his inheritance. If he wanted, he should look for it, he should create it himself with his own hands; and very easily it was; he only had to step outside of the path of law and order to fall victim to punishment. He had been created with definite organs. His mind like his body revealed the purpose for which he had been made. If the aim of nature was missed, the creature was to

*Written for the Minnesota State Homeopathic Institute, Session of 1908.

be crushed. No one can use a watch for a pick without injuring or destroying it; and the organism, both mental and bodily, of man shows the end it was made for, hence *sin* both of commission and omission was the open gate through which the flood of disease entered, and gained possession of the garden of Eden, that is, the kingdom of life, beauty and happiness, where man reigned supreme.

Coming down from such abstractive regions, we will materialize ourselves that we may peep an eye into the universe. In everything that surrounds us, we find *energy*. There are potentialities in the three kingdoms, the sum or total of which is detected in the animal kingdom. But, while the plant stores up or assimilates energy, such as water, carbonic acid and inorganic salts, animal protoplasm, on the contrary, characterizes itself chiefly by its *katabolic* power, excreting carbonic acid, water and urea. *Anabolism* chiefly in plants, *katabolism* especially in animals; still both powers are in both kingdoms.

Living (organic matter feeds itself, transforms dead matter into living tissue, and reproduces itself. Nutrition and reproduction are its most fundamental properties, and through the reproductive organs of plants and animals the continuous chain of life is provided for in both animal and vegetable kingdoms.

It is an averred fact also that as long as the kinetic energy or life force in action, acts orderly or physiologically, we have no disturbances in the economy, that is, we have no pathology (disease) so called.

It is admitted also that potential energy, that is, latent life, is present in the unfecundated ovum, whose energy becomes kinetic or active upon the entrance of the protozoon into the ovum. Then and there vibration begins, molecular splitting occurs, radiation of life takes place, the mother-cell engenders her daughter-cells; a family is grown, a society built, a kingdom established, whose provinces are the lungs, the heart, the kidneys, the liver, the bowels, the bladder, the stomach, the brain, whose canals are the blood vessels and the lymphatic channels; whose ways of communication are the spinal axis and its ramifying nerves; whose central government is in the brain; whose autoocratic king is the will with its prime minister the intelligence; whose governors are

the sympathetic ganglions whose organizing resources are *energy* or life.

Here we have something wonderful in construction, organization and activity. And this wonder comes all from the intelligent development of the resources stored up into the infinitely small but fecundated ovum. Organized life is not the work of hazard, it is due to an orderly government working in an orderly way to reach an orderly aim, that is, life acting within a set of well-disposed organs, and acting intelligently and harmoniously.

Therefore the beginning of a determined living body is living and orderly, living potentially first, and kinetically next, if submitted to the touch of the sperm-cell. And if this active and organizing force (life) uses the material it is stored in and that which comes near it (through feeding) to perfect a beautiful kingdom, wherefrom shall come the proctor of the kingdom to keep it orderly and existing, if its founder (life, the kinetic agent) remains not or is not necessarily and really its manager? Outside of order we only find disorder. Outside of health and life we encounter disease and death. And any and all diseases are but the agents of a destructive or disorganizing force called *death*.

We forcibly must confess that from the moment a given living organism ceases to functionate in accord with its predetermined and existing organs, there is either local or general interference, or both. If the structure be traumatically affected, the cause of the trouble will be external, and only then. But in all other cases, the derangement will arise from a lack of control of the manager (life) over the kingdom (body), because said manager is an autocratic ruler. The governors (the sympathetic council) are under his command. When the bodily domain shows signs of uneasiness, lack of prosperity, upheavals, revolutions, decline and the like, the organizing resources (the kinetic element) are disturbed. Enemies (diseases) have invaded the structural property, musketry, artillery, cavalry and infantry are at work. Who will be the victor? The principle of organization and order (life) will either conquer or be vanquished. Maybe a truce to last a few years only will be signed. Maybe the enemy will again retain a part of a province; but in either case the pres-

tige and power of the founder of the kingdom will be diminished. And again, after days and nights of hard fighting, the enemy may be driven away, and the proctor and kingdom saved.

But this energy called life that so well builds up and rules the body, can we see it, palpate it, feel it, measure, weigh it and taste it? Is there any gauge one can use to determine the quality and quantity of a given energy, except by the results said energy produces when set in action? Here we see one side of the absurdity harbored by tenebrous lights who, in the medical arena, make one think of Lucifer spreading his wings in the bottom of the eternal abyss.

The intelligent principle concealed within the ovum that the kiss of the protozoon kindles into activity is immaterial. In the haven of energies lies no matter, save that through which they are revealed to man.

Life is immaterial *per se* and *in se*. Life is material in its active forms. Life is an immaterial, intelligent, active, orderly energy force or principle. It is that, all of that, and nothing else. Where there is no *activity* in some form, there is no life, there is only *nothingness*. It might be said here between parentheses that God is but Eternal Activity and nothing but activity *in se* and *per se*, and the Father of all contingent activities, tending to good, order and perfection.

As Kent puts it: "To believe that man exists without a cause, to believe that his life force goes on for a while and does not exist from something prior to it, to think that there is not constantly and continuously that influx from cause whereby he continues to live, demonstrates that the man who does so is an irrational being."*

In the *material* world, energy is always rhythmic and harmonious in its results. Its operations and forms do not change. The eternal influx of order is not interferred with. In nothing material is there a temporal will to oppose the decrees of the Eternal will. In man it is not so. Man can live as he chooses, either rationally or irrationally. He may, if he will, keep himself in order or disorder. The irrational creature is led by instinct; and the animal instinct is orderly and imperative. Where there

*Kent's Homeopathic Philosophy, Lecture VIII.

is no reason, there is no will; that is the beast. Man is a rational being. As man thinks, so he is. Disorder enters his economy through his mind first. As man thinks, he wills; as he wills, so he is. The integrity of the will and that of the organizing principle (life) go hand in hand. Hence disease, the precursor of death, entered the body of man through the will. Will and no action, is no will. Will acting is man in perfection or destruction. Hahnemann thought of that, and founded a new theraphy.

If the thoughts of man flow in a rational way, he will act rationally; and his living in conformity with the law that governs him will cause him to remain a healthy being in mind and body. (We must here make abstraction of inherited miasms or dyscrasiae). In this we see the sequence of Hahnemann's idea, that the mental symptoms head the list in the totality of symptoms upon which a homeopathic prescription is based. I would say that, in any given case, a prescription must be built upon the mental basis of the patient, because the mind is man in *toto*, and for whom do we prescribe, if not for man?

From what precedes, we may conclude that the diseased manifestations of life in man come from the irrational conduct of man. Had man always lived orderly, he would have kept himself orderly. His organic mechanism would never have been damaged. Were it otherwise, we should prove that the Eternal Architect lacked intelligence and goodness. Law is order, and order is law; he who lives according to the natural laws that govern him, lives in harmony with the Eternal Harmony, and is harmony himself. If disease is a disordered state of the organism, it is not the organism that sinned first, but the will that controls it instead.

Had man obeyed his natural laws of health and purity, the infernal itch would have never gained access into his economy. The same applies to syphilis and sycosis.

Truly may one say that diseased state of mankind and death entered this world through the irrational conduct of man: and one needs not base one's assertion upon the biblical word, because philosophy and science suffice to convince one of the truth of it.

Disease is then not cellular or material in its essence, but

dynamic instead. Disease and health, life and death cannot be cornered in a beaker nor under a magnifying glass. When we see a damaged organ, not traumatically upset, we readily infer that the controlling agent (life) of the structural mechanism has been attacked by enemies capable of reaching it, that is, by agents as subtle (dynamic) as it personally is. The reigning or managing element in a given body is immaterial, and of what nature should be the causes disturbing it? Trauma tears, crushes, destroys the cell; it may squeeze the life out of the body, so to speak, but it could never act upon the intelligent activity that animates it. Trauma and life are agents that do not vibrate on the same plane. The former belongs to the world of material substance, and the latter to the domain of immaterial substance. One is above the other. The traumatic effects must be materially attended to and corrected. Those originated from dynamical or immaterial causes must be remedied with dynamical or immaterial substances (hence the need of potentization of drugs). This sounds like logics; and, were we not logical, we could not pretend to be rational. The principles of Homeopathy are hard sense, and anyone can become familiar with them, if he only takes the trouble to make their acquaintance. What makes a man are his convictions; and if sound teaching is given our medical students, we will have sound homeopaths. Mongrelism may, to a certain extent, be due to lack of gray matter, but is generally caused by unsound teaching. If our boys are taught that disease causes are *material*, they will forcibly not believe in the *potentized* dose, and why should they? If diseases are *cellular* in their essence, why should we not resort to local treatment, antitoxins, etc? If our boys believe that there are no such things as *miasms*, that we only have *germs* to combat, they would not be logical were they to treat the *patient* and not the *disease*, the *organ*, the *germ*. At first sight, Hahnemannism seems to be contradicted by the data of modern science; but on scrutinizing it, one finds it in conformity with, and superior to, them. What our principles want is to be modernized in their presentation and enunciation.

Going back to the *cell* of the body, we must admit that its energy (quality and quantity) depends upon the constituents of the cell itself and upon its freedom of action. A body weakly

built cannot compete with a strong one. A life principle impregnated with the psoric, syphilitic or sycotic virus is not free in its action in spite of the orderly living of the possessor of such a life principle. And were the three taints present in the same individual, the cross to bear would indeed be crushing for human shoulders. Such individual are martyrs; and God only knows they are in plenty.

The susceptibility to disease causes for any organism will then depend upon its build, inheritance and way of living. Upon this tripod does death build its scaffold and instruments of torture; and upon it depend our long or shorter stay in this world and our enjoyment of life. No doubt many lives are prematurely lost through the mistakes of the medical man; but this is unavoidable.

The etiology of all diseases, outside of trauma, is then based upon the state of energy animating the cell. If we repeat ourselves, we shall say once more: disease entered this world through the will of man; had man always lived orderly, we would have no diseases (*inherited miasms*). Hence, disease exists in a latent form (*miasms*) and becomes visible in acute and chronic disturbances of the cellular organism. What we call indispositions are merely due to errors in the way of living, which soon correct themselves on the removal of the external cause. Disease is known to be an active element which tends to the destruction of the organism by subtracting it from the rule of organic life. Its acute manifestations are but more or less violent exacerbations of a chronic miasm inherited. What we call self limited diseases fall under this head. We hear so much of *contagion*. What is contagion really? The *liability* to develop this or that self-limited disturbance; but this *liability* (*susceptibility*) is in inverse ratio with the degree of integrity of the life principle imbedded within us. If this principle were intact, the mode of living rational, we would not see what we *scientifically* term disease germs and germ diseases. How could we? Can order and disorder reign together within the same space and boundaries?

Were we not so imbued with the materialistic genius of our times, we would unconsciously think from cause to effect, as the sane mind always does. We would see that microbes, like any

material substance, would not reach the immaterial (life) element that permeates and controls each and every structure of our anatomy, in order to disturb it, except through the inoculation (a traumatic cause) of their virus-like products containing acute miasms (disease-principle of acute disturbances). It is in line with science and common sense to contend that the microbe life never develops spontaneously, that is, without a cause, and that its existence and *physiological* activity of the tissues are one and the same antithesis. But the *microbic life* is always seen associated with *pathological* energy, and the *microbe* institutes not *pathology*, but the latter favors the former. This in conformity with *irrationalism* in cellular function, and rationalism in intellectual exercise.* Who can prove the contrary?

The life principle permeates the whole organism; it dominates and controls the bodies it manufactured or organized; it keeps them in a continuous constructive and reconstructive state; for, were it not so, the cell would readily fall under the action of physical and chemical laws, and pass out of organic existence.

If a given man enjoying good health feels it everywhere like a stimulating and rejoicing liquor permeating every cell of his organs, who will tell where disease lies, when the same man most emphatically asserts that *he* is sick? Is it his liver, kidney, brain, heart, lung, stomach that is sick, or rather his life element? And if this immaterial element has been upset by immaterial agents (trauma excepted), will material doses reach the constructive and destructive energies, or rather act on the same plane as matter or food does? True it is the body has the property or power of *potentizing* certain elements: but were it capable to developing the potentialities stored up in each and every element used as food, and of developing it to a degree remedial and curative, the medical science and practice would have no reason or cause to stand, because nature would do the *therapeutic* work entirely. But even though nature is a great and honest physician, she needs help to perfect her curative work, and here lies the necessity of physicians, and more so of Homeopathy. Experience teaches the

*Regarding the microbic life, the reader is referred to Homeopathy vs. Pathology and Child-Bed Fever and Its Treatment, two articles already published by The Critique.—Note of the Author.

value of lycopodium, carbo veg., saniacula, silica and other remedies when given in a crude form. We daily see the results obtained by feeding lime water. This supports the assertion that many a drug must be dynamized prior to its introduction into the system that the latter may utilize it as a curative means, or rather, that nature cannot do it all alone.

But do we not often hear some of our men despise the organon and its author? They do it only through ignorance. Numberless are the *materialist* homeopaths living in the shadow of the monuments of Hahnemann; and in their insolence and contempt they contend they know better than the man upon whose statues they rest their cynical looks. What a pity! May they be forgiven, Oh Lord, because they know not what they do!

Let the crucifiers of Hahnemannism, the alternationist, the tincture man, the high priest anointed with lard, vaseline and suet, the douche giver and the germicider come to the front and tell us when and where they were taught the homeopathic principles of practice. Our principles do not become antiquated; they are everlastingly true as the natural law of similia from which they derive. I see in your faces that all of you are men of honor and physicians of talent, and could not sacrifice upon the altar of Baal. Your familiarity with our principles and living up to them has convinced you that outside of homeopathy there is no bodily freedom for him who is affected with disease. You can feel that the *etiology* of disease lies *not* in the *cell proper*, but only in the element animating it, that the curative action is done within this element with the aid of the dynamic and similar remedy, and that without the aid of adjuvants, for the law of similia is a natural law.

I wish that your faith, courage and dignity as men and physicians be duly rewarded by a legion of graduates leaving our State Homeopathic Medical College, thoroughly conversant with the homeopathic principles of practice; that they may honor your name and that of Hahnemann with a life successful and true, adhering strictly and confidently, as you do, to the tenets of the law of *similia*.

Centreville, Minnesota.

EVERY DAY PRACTICE

Peculiar and Unusual Cases Wanted

*RETAINED PLACENTA AFTER ABORTION.

By F. E. Gladwin, M.D., H.M.

DECEMBER, 26th, 1903, Mrs. L.; tall, slender; dark hair.
History of case:

Not been well since an abortion at third month during the first week of September.

Menses have been very irregular since the first week of September, when had a miscarriage.

Periods come sometimes a week, sometimes two weeks after the last has ceased.

Flow long lasting.

Last menstruation six weeks ago. Flow continued four days which was her normal length of time.

Leucorrhea yellow, stringy and of a peculiar odor.

Numbness from knees down; worse in feet.

Hands and arms have been numb but they are better now.

Collar seems tight; can't stand it for the choking sensation.

Emaciating.

Palpitation when first taken ill.

Lump in throat; can swallow it away but it returns immediately.

Bloody taste.

Bad taste and dryness in throat.

Hawks up bloody water.

Stiffness and drawing from lumbar region; dull, heavy aching from waist up.

Sleepless at night from 12:30 to 4 a. m.

No appetite.

Constipation.

Nervous; despondent.

Imagines she has all kind of disease.

Imagines she is going to die.

Imagines she hasn't any friends.

R. Lachesis, 41M.

December 28.—Sleepless and restless all night.

No appetite; food seems to work up and stick in her throat and choke her.

*Read before Hahnemann Round Table of Philadelphia.

Spine sore, lower cervical and upper dorsal as though would break apart.

Stiffness of nape when holds up her head.
Headache.

Vertigo, begins in nape and goes up over head, not exactly a dizzy feeling but more like flush of heat.

Pimples all over body for two or three weeks since allopathic treatment.

No stool for two days. Anus contracted tight, with sensation of worms crawling in anus and rectum.

Throbbing in anus.

Soreness in stomach with painless throbbing.

Urine scanty, high colored, red on first passing, then yellow or standing as if had poured milk into it.

December 31.—Feels brighter in herself.

Slept little after 12 p. m. last night.

Pain in vagina during coition.

Little growths in vagina and vulva.

Bearing down pains in abdomen yesterday.

Urine profuse today.

Pain instead of numbness in ankles.

"Faint" feeling in stomach.

Collar choking less this morning.

January 1, 1904.—Menses (?) came yesterday.

Several pieces of placenta came away without pain.

Faintness by spells.

Head feels light, as floating.

January 17.—Better than any time since last September.

Leucorrhea better.

Nervousness better; don't weep any more; don't imagine so many things.

Appetite good.

Gaining flesh.

Improvement continued until she was quite herself again.

From a scientific standpoint the retained placenta might be considered the cause of all the trouble in this case, yet I cannot find in any of my repertories or *materia medicas* that *lachesis* has retained placenta. The patient herself was *lachesis*, therefore she received it and in four days, pieces of placenta that had been retained four months came away without pain. This is one of many cases that has caused my gratitude to the teacher who taught me to know which symptoms tell of the patient and which do not. Had I considered the retained placenta first, as probably I should have done without the knowledge of the value of symp-

toms, the first prescription would have been wrong and the case so mixed that possibly I would have had a fine experience in all the dreadful things that the would-be scientists warn us against. The lachesis turned the patient into order, the organs took up their normal functions, the uterus cast out the pieces of placenta that had been retained. If this is nonsense, my brother, in the name of suffering womanhood I beg of you to use the same kind of folly.

* * *

February 6th, 1909. Miss M. History of case:

Cold; can't get warm. Wrapping up warm and sitting by the fire makes her no warmer. Has been burning up during the day, but was cold during the heat. Burning up and cold at the same time.

Aching and little pains all over.

Pulse 114; thready.

Temperature 100°.

Has had a cut across second joint of left middle finger for three or four days. In the meantime has washed handkerchiefs used by patient having bad case of tonsilitis. Handkerchiefs had been soaked in Platt's chlorides.

Cut is now wide open and filled with bloody pus. Finger and hand dark rose red and swollen. Red streak extending up arm to elbow and on inside of upper arm to axilla.

Soreness of axilla and red spot on upper arm.

Finger and hand painful; hot.

Worried, anxious.

R. Pyrogen, 50M.

February 7.—Hand and finger less swollen and painful.

Feels all right every way but hand and arm, which are still sore though better.

Improvement continued and she made rapid recovery.

I give this simple little case as a verification of pyrogen.

Philadelphia, Pa.

TETANUS AND CARBOLIC ACID.—Dr. A. H. Seibert reports a case of tetanus which showed no improvement under ordinary lines of treatment, but which began to improve when carbolic acid in two per cent. solution was administered hypodermically in doses of 10 minims every two hours.—Medical Century.

CONTRIBUTED

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THE A. I. H. "TEMPEST."

TO THE CRITIQUE: In the March issue, just at hand, I note your presentation of my recent communication anent the candidates for the presidency of the American Institute of Homeopathy, and beg to add an addenda based upon information acquired at the New Orleans meeting of the Southern Association—the best, by the way, in point of interest and attendance, that body has had in twenty-five years of its life. Dr. Horner is not a candidate for the presidency, but is making such an efficient secretary that his friends, and they are legion, will doubtless indefinitely continue him in that office. But as the list has been decreased by Dr. Horner's disavowal of a candidacy, so it has been made as before by the addition of the name of Dr. Gaius J. Jones, of Cleveland. Dr. Jones' home city is sending out a circular in his behalf, the first time such a thing has been done in the Institute's history. But as there is but little difference between a circularized petition and the usual number of individual letters which most all of us have written in the past, and which others are still writing, it is not seen that very serious objections can be taken to the methods of Dr. Jones' friends.

Dr. Hinsdale is thought to have the poll at the present writing, with Drs. Jones and Sawyer nip and tuck for second running. Combinations may be made which will make one or the other the Ohio Candidate. The chief cry of the opposition to Dr. Hinsdale is that Dr. Copeland, so recently of Ann Arbor, has just had the presidency, and that Dr. Dewey, also of Ann Arbor, has everything else in the Institute worth having, Dr. McLachlan, of Detroit, is also said to have the bee buzzing about him, and this may make two Michigan candidates against two Ohio candidates. And thus it goes. Colorado can have a place, all seem to think, for the asking, but whether the first place at this time is hard to say. Very many favor Dr. Kinley, now or later.

In justice to Dr. Sawyer it may be stated that he disclaims being the candidate of the "set."

Yours sincerely,
New York, March 5, 1909.

C. E. FISHER.

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Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

BY ALL MEANS, young man, study medicine, and see your name connected with something like the following:

Harrisburg, Pa., March 9.—Rose Cohen, an eight-year-old girl, is convalescing in the Harrisburg hospital after having been operated on Sunday for appendicitis by mistake. The child and her eleven-year-old

brother were sent to the institution suffering with tonsilitis. In some unexplained manner the girl was given an anesthetic and her appendix was taken out. The surgeons say that the appendix was somewhat inflamed and they did not discover their mistake until the parents called. The humorous feature of the case is the assertion that the condition of the little girl's appendix showed that she would have developed appendicitis anyway, and that the operation, therefore, was a fortunate mistake.

The foregoing will, no doubt, serve as a stimulating incentive to most young men to become matriculants in some medical college, that is if they have suffered a complete loss of self respect and ambition. The frenzied efforts of members of the surgical section to make everything *operative*, has placed professional men possessing even a modicum of manliness in a position not at all enviable by just such "heroic" treatment as the foregoing outlines. There is one extenuating situation connected with the statement, however, and that is, thank God, it may be a lie manufactured out of whole cloth. I sincerely hope that such is the case.

M.

* * *

IT IS IN ANTICIPATION of a most profitable and pleasant meeting at Detroit that THE CRITIQUE calls attention to members of the American Institute of Homeopathy to the short time intervening until that event will take place. Besides the scientific side of the meeting the social events occurring at these sessions have always acted as a great stimulus in augmenting the attendance and there is no doubt but that the entire program this year, both scientific and social, will be on a scale equal to any presented thus far. Just how many will attend from Colorado is a question which time alone will settle, but inasmuch as this state has a prospective candidate for the presidency and that one of the bureaux is in charge of a Colorado man, no doubt there will be quite a goodly number present from the Centennial state.

To those who have never visited the historic city of Detroit, it might not be amiss to quote one who is familiar with its better points, and in doing so and at the same time quoting the name of Dr. Benj. F. Bailey, of Lincoln, Neb., I present the matter in a manner calculated to inspire confidence in its reliability. During a recent visit to Denver, Dr. Bailey declared that, barring

Denver, Detroit was one of the most beautiful cities on the American Continent. I appreciate the good doctor's courtesy in combining our city in the compliment, and, laying aside the fact that the situation would have been presented in reversed order had he been talking for Detroit listeners, am perfectly willing that Detroit should carry off all the honors in this respect just so the forthcoming meeting of the A. I. H. proves a memorable one in more ways than one.

A memorable one in the way of attendance.

A memorable one in the way of papers presented.

A memorable one in the number of new members added; in fact from any view point capable of comparison with former events.

By the way, our *Journal* is bewailing the fact that present indications do not point to as large an increase of new members as those enthusiastic on this subject would like to see, so it stands every individual member in hand to interest at least one non-member, to the end that this particular feature will not fall short of last year's struggle.

I am printing another communication from Dr. Fisher, in this issue, from which it may be learned that the presidential proposition predicts many controversial complications which are calculated to heighten the interest of the meeting. If Colorado *should succeed* in securing the prize THE CRITIQUE would be only too happy to join in congratulations to the winner. Just at present, however, I am not preparing any eulogistic editorials for use in emergency cases, such as lightning striking in this territory, etc., inasmuch as I realize that the rank and file of homeopaths in the country, to use an expression employed by a Colorado contributor to the *Journal of the American Institute of Homeopathy*, in pointing out certain Colorado Springs suspects, "want one thing or another." Rather vague as presented, but this correspondent was referring to whether they were real homeopaths or just make believes, and that is what I want to know; whether "our" candidate comes under the former or latter designation

M.

Miscellaneous Matter

Send Us a Personal Item Occasionally

Dr. A. F. Swan, Leadville, was a caller the fore part of last month.

* * *

Look over **The Critique's** clubbing rates. Not "Holiday" attractions but good all year 'round.

* * *

Dr. A. L. Fugard has been nominated for mayor of the city of Pueblo, on the Republican ticket.

* * *

Dr. J. B. S. King succeeds the late Dr. H. C. Allen as editor of **The Medical Advance**. Dr. E. A. Taylor is associate editor.

* * *

The Hotel Tuller will be found to be a most delightful place to stop when you attend the meeting of the A. I. H. at Detroit next June.

* * *

Dr. James W. Ward of San Francisco was "remembered" in the will of the late William Hardey to the tune of \$2,500. Good, and then some.

* * *

Business manager of **The Critique** now sports a brand new Maxwell, '09 model. This is one of the most "classy" machines on the market.

* * *

Fifty-seven new members were added to the list of the Southern Homeopathic Society at the recent meeting held in New Orleans. That's going **some**.

* * *

Write the Carlisle News Company, Majestic Building, Denver, Colorado, for copy of "**The Magazine Guide**." It will tell you how to save money on all your reading matter.

* * *

The Rock Island city ticket office in Denver has been moved to the corner of Curtis and Seventeenth from Stout and Seventeenth. Great line if you are figuring on going "anywhere."

* * *

Senator Twining, who endeavored to engineer a law through his branch of the state's legislative organization, was at one time a student at the Denver Homeopathic Medical College.

* * *

Dr. E. H. King has moved his offices to 24 Union block, corner of Arapahoe and Sixteenth. This is the same building in which he has been located since leaving the Steele block; just another room.

Editorially the **Journal of the American Institute of Homeopathy** appeals to the membership individually and collectively to secure more members. **The Critique** hopes that the increase at the Detroit meeting will be a record breaker. Get busy and "rope" a recruit.

* * *

It is getting along towards the time when those contemplating the trip to Detroit in June should begin planning their route. The Hotel Tuller is the best place to stop after you have arrived at your destination

* * *

An Italian woman, according to **Indian Lancet**, has broken all records of childbearing; in nineteen years of wedlock she bore sixty-two children! If Terrance Roosevelt were to hear of that, wouldn't he "smile"?

* * *

Homeopathy has many followers in Bavaria. A society of followers of this faith is to be established in Munich. **Homeopathic Seger** is the name of a homeopathic journal which has recently been established in Sweden.

* * *

Dr. Fisher writes us that the last meeting of the "Southern" Homeopathic Society was the largest attended of any during the twenty-five years of that organization's existence. That is encouraging, to say the least.

* * *

Remember **The Critique's** clubbing rates are not "Holiday" attractions. We are prepared to make good at any time during the year. Write us for particulars. Read our advertisement and that of the Carlisle company for rates.

* * *

Dr. J. W. Mastin has been appointed medical examiner for the International Harvester Company of Chicago, this organization having a number of employes in this state who are members of the mutual association conducted by that company.

* * *

A Sixteenth street merchant has a sign which warns people against using "granite" ware, as it promotes the possibility of appendicitis. According to this same authority the use of "aluminum" ware is a preventive. He, likewise, deals in aluminum ware.

* * *

In the death of Dr. Taft of Longmont, a large territory in and about that city is left unoccupied by homeopathic practitioners. This would be a most excellent location for someone desiring to practice this brand of medicine. Write **The Critique** concerning this excellent place.

The Pennsylvania State Homeopathic Society has a membership of 583, according to report of the recent proceedings. Of this number, nine are "honorary" and four are "corresponding," leaving an active membership of 570. How many of these belong to the A. I. H.?

* * *

Physician desiring to go East will sell books, office equipment, buggy and harness and horses, to right man, and stay to introduce him. Excellent opening for man who wants to fish and hunt some of the time. Rich agricultural country. Address Box 43, Eagle, Colo.

* * *

A Denver doctor failing to collect in full for services in an obstetrical case, retained the kid as security; that is what the fond parents declare. The doctor said it was because the baby was too weak to be moved away. Anyway the "baby wasn't paid for." Is yours?

* * *

We are looking for recruits for active service in the *Materia Medica* department of the forthcoming meeting of the A. I. H.; if you feel like writing something on the subject for this meeting address either Dr. Lewis Pinkerton Crutcher, 224 Shugert building, Kansas City, or Editor of *The Critique*.

* * *

Numerous "bills" have been brought to the attention of the Colorado Legislature, many of which were intended for the correction of glaring offenses by those who practiced medicine and surgery in opposition to the views of members of the State Board of Health and certain political physicians with a pull.

* * *

Dr. G. Stillman Bailey of Chicago, in a paper read before the Southern Homeopathic Society at New Orleans, the latter part of February, declares that the wonderful therapeutic value of certain pitchblende products, found principally in Colorado, will revolutionize the practice of surgery. Oh, Colorado is all right.

* * *

Transactions of the forty-fifth session of the Homeopathic Medical Society of the State of Pennsylvania have been received at this office. It is quite an imposing-looking document and its contents develop the fact that this same forty-fifth session was a record-breaker. Dr. D. P. Maddux, Chester, Pa., is the president of the association.

* * *

Out Washington state way there appears to be a wave of wisdom sweeping over certain sections. A homeopathic physician has been asked to deliver a course of lectures on homeopathy and homeopathic *materia medica*, before the Nurses' Training School of St. Luke's Hospital, Spokane. We hope he complied with the request.

The Critique desires to acknowledge its obligation to Dr. C. E. Fisher for copies of New Orleans papers containing a full account of the Southern Homeopathic Medical Association's meeting. The peculiarity of the writeup in so far as its completeness is concerned is noticeable on account of the scant courtesy shown such affairs in other localities, and is what causes us to emphasize the words full account.

* * *

Dr. William F. Waugh, or perhaps he is not a doctor—we do not know—is collecting material for a paper upon atropine as a hemostatic and would be obliged to any of The Critique's readers who would send him notes of their experience with this remedy. The gentleman in question is particularly anxious to receive adverse reports, as well as those favorable to the remedy. It is now "up to you," dear atropine advocates.

* * *

Dr. Benjamin F. Bailey, Lincoln, Neb., ex-president of the A. I. H., proprietor of "Green Gables" and all around homeopath and gentleman, was a welcome visitor at The Critique sanctum sanctorum the 11th of last month. Dr. Bailey was on his way to Kansas City and among the many pleasant things which he was kind enough to say was that he considered Denver the most substantially built city in America. Every little helps.

* * *

At the March meeting of the Denver Homeopathic Club "Scarlet Fever" was the topic under discussion. Dr. James Butcher Brown gave a general outline of the disease; Dr. Horace T. Dodge told about post-scarlatinal nephritis, and Dr. Grant S. Peck explained the ear complications. We got all this from the postal card announcement which we received, and hope that "a full and enthusiastic attendance" as well as the earnest discussion which was desired, eventuated.

* * *

"Consumption," according to a large, stallion-style poster advertisement in one of our Sunday papers, can be "permanently cured with pure and progressive homeopathy." The ad. advises one that, notwithstanding the permanency of the cure, if it returns, all they have to do is to "come back" and they will do it to them some more, free of cost. This great boon to humanity can be secured only at a certain "institute" located at Boulder, Colo. More power to "progressive" homeopathy, say we.

* * *

We are sorry to see the *Cleveland Medical and Surgical Reporter* reproduce the following, which was taken from a recent write-up in the news columns of the *Journal of the American Institute of Homeopathy*: "Colorado Springs with 28,000 population has but two men of the homeopathic school. There is plenty of room for a good,

straight homeopathic physician. There have been three physicians in this city, but they have been failures for the reason that they have not been distinctive homeopaths and the people want one thing or the other."

* * *

The local committee of arrangements, A. I. H., which meets at Detroit in June, is composed as follows: Dr. D. A. MacLachlan, chairman; Dr. J. M. Richards, secretary; Dr. R. C. Olin, treasurer. Hotels and Hall, Dr. C. G. Crumrine, chairman. Entertainment, Dr. O. Leisure, chairman. Reception, Dr. C. C. Miller, Chairman. Finance, Dr. R. H. Stevens, chairman. Exhibits, Dr. R. M. Richards, chairman, Transportation, Dr. Bruce Anderson, chairman. Press, Dr. Dale M. King, chairman. Clinics, Dr. H. S. Knight, chairman. Ladies, Dr. E. Louise Orleman, chairman.

* * *

Senator Cofer introduced a bill in the Texas Legislature recently providing for the establishment of a chair of homeopathic materia medica and therapeutics in the Galveston branch of the State University. The bill also provided for the engagement of a teacher—one identified with the homeopathic school, so that no mistakes would be made in the brand taught; and to set aside and furnish the necessary quarters for didactic and clinical lectures. Right here the story stopped and we await further developments before extending any very profuse congratulations to our Texas brethren upon their successful struggle, etc., etc.

* * *

In the March issue of **Pacific Medical Journal**, Dr. J. Frank Lydston takes a fall out of Simmons, secretary of the A. M. A., and it is very apparent thereby that while Simmy may be afflicted with an unusually unreliable memory, that his accusers are possessed of correspondingly acute and retentive ones. Another contributor to this same publication breaks out in rhyme regarding this same individual, so, taking everything into consideration, we are inclined to think that a coolness, at least, exists between several members of the A. M. A. and the honorable secretary thereof. Did you ever inhale the odor of burnt wool? Well, that's just the way it **tastes**.

* * *

"The Detroit local committee for the American Institute meeting have decided upon the new Y. M. C. A. building as the place to hold their sessions. This building has just been completed and dedicated about a month ago. It is said to be the most complete Y. M. C. A. building in the United States, and cost about three-quarters of a million. It is safe to say that the Institute has never had a place better adapted to its wants. A large public hall for general meetings, many lecture and class rooms for sectional meetings and committees, plenty

of space for exhibits, a café and roof garden in the building, close proximity to street car lines and leading hotels.—**Detroit Items**, J. A. I. H.

* * *

The election of officers of the Southern Homeopathic Medical Association resulted as follows:

President—Dr. Edward Harper of New Orleans.

First Vice President—Dr. Wm. E. Riley of Fulton, Mo.

Second Vice President—Dr. Geo. W. Bagby of Richmond, Va.

Secretary—Dr. Wm. A. Boies of Knoxville, Tenn.

Treasurer—Dr. John T. Crebbin of New Orleans, La.

The meeting in question was largely attended; among the distinguished guests being the principal officers of the American Institute. The "Southern" was a decided success in every detail, and it is to be hoped that the enthusiasm instilled into its proceedings will find imitation at the A. I. H. which meets at Detroit next June.

* * *

With the exception of a slight delay the consolidation of **American Physician** and **Medical Counselor**, under the name of the latter journal, has been brought about without any particular flourish of trumpets, the result being an A-1 publication of which homeopathy in general should feel justly proud and patronize accordingly. We have always considered Dr. Dale M. King one of the brainiest and best balanced members of the editorial fraternity, and in saying that the late Frank Kraft has a worthy successor in him is paying Dr. King a compliment not only richly deserved, but is one he should feel well pleased to accept. **The Critique** congratulates readers of **Medical Counselor** upon the additional facilities placed at their disposal, and welcomes this new-old publication most heartily. It was a long time coming, but, like the old lady's meal, which was considerably behind time, it was "worth waiting for."

* * *

The many professional and personal friends of Dr. F. P. Taft of Longmont, Colo., will regret to learn of his death, which occurred at his home in the above-named city Friday morning, March 5th. Cause of death, intestinal hemorrhages. Dr. Taft lacked but a few days of being thirty-eight years of age, yet, notwithstanding his comparative youth, had occupied a position of prominence in the homeopathic profession for several years. He graduated from the New York Homeopathic, class of '92; was married to Miss Margaret Cowie of Arcadia, Wis., in 1896; has practiced medicine at Longmont for the past ten years. The doctor had a large following and was much respected as a citizen and physician. The remains were brought to Denver the 9th of last month and cremated. Dr. Taft is survived by a wife and son, father and mother. **The Critique** extends its heartfelt sympathy to the bereaved ones.

READING NOTICES

Of Interest to Everybody

THE POISON LABEL IN RUSSIA.—Since the Russian government enacted the law requiring the poison label to be attached to all containers of Vodka (a strong alcoholic beverage), numerous cases of accidental poisoning have been reported from various parts of the empire. There is a large population of illiterates in Russia, and with them the poison label appearing on Vodka bottles has come to stand for Vodka. As a result many bottles of really poisonous mixtures are being drunk by these people under the impression that any bottle bearing the poison label contains Vodka. This emphasizes the danger of making the poison label too common, for while we have few illiterate adults, we have many children, and to them the poison label now means a sign of real danger. The attempt to impose the poison label upon drugs, medicines and household remedies, which have been freely and harmlessly taken for years, cannot be too severely condemned. When the poison label appears too often and on nearly everything, children as well as adults will become careless of poison labels, because the word poison and the skull and crossbones will lose their terror, and bottles and boxes of really poisonous drugs will be carelessly left with bottles of harmless remedies, because all are labeled alike. The dangers to the public, and to children particularly, of this confusion, cannot be overestimated.—**The New England Druggist.**

FUNCTIONAL NEUROTIC DISORDERS.—The various vital functions of the organism are so intimately associated and correlated that it is impossible to definitely attribute any chronic nervous illness to disease or derangement of but one of the great bodily systems, i. e., circulatory, respiratory, digestive, lymphatic or nervous. The many neurotic conditions which the physician is so frequently called upon to treat cannot be successfully attacked by confining treatment to the nervous system exclusively, any more than can the cutaneous afflictions—acne, eczema or urticaria, be permanently relieved by lotions, washes and unguents alone. Neurasthenia, nervous “breakdown,” nervous prostration, “brainfag” and allied states are usually but neurotic manifestations of some constitutional metabolic fault, which must be sought out and remedied if intelligent therapy is to be applied. Among the various pathologic conditions which oppose the relief of neural disorders, anemia, whether primary or secondary, is always worthy of therapeutic attention. Unless the blood supply is relatively normal in both quantity and integrity, its oxygen-carrying capacity is “below par” and, consequently, metabolic exchange and interchange is embarrassed and the necessary improvement in bodily nutrition is difficult of accomplishment. Pepto-Mangan (Gude) stimulates and encourages oxygenation and nutrition, by furnishing the more or less impoverished blood with an immediately appropriate form of its vital metallic elements, iron and manganese. The vital stimulus thus imparted is often the one thing needful to initiate the substantial systemic “building-up” process which must precede the desired recovery from neurotic disorders.

VOL.
XVI

ORIGINAL ARTICLE

No.
5

Denver, Colorado, May 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

USE OF REPERTORY IN COMPLICATED CASES.*

Julius C. Loos, M.D., H.M.

CONDITIONS FOLLOWING THE FIRST PRESCRIPTION. In treatment of cases of chronic disorder, every item that contributes to facility and completeness of study of the case is worthy of consideration. It is therefore recommended that a written anamnesis be used in the first repertory study and attached to the record from which it was constructed. When the remedy selected by this study has been administered to the patient, the next thing for the physician is to observe carefully, the result of the prescription.

There may be a period without practical change in the symptoms. After waiting a reasonable length of time, it is then desirable to review the record carefully, including the anamnesis and thus determine if the chosen remedy is really most similar in its image to that presented by the patient. By this review, the prescriber will find either that he has overlooked some important features in the case or in related remedies which determine some other remedy more similar or that the remedy selected is most similar.

Certainly if another is thus determined to be required, from its evident similarity, it will be administered. If on the other side, the first prescription appears most similar no other should on any account be administered without longer waiting. Observations have been reported where the first manifestations of the action of deeply acting remedies, in chronic cases appeared after weeks of waiting and then progress was continued and satisfactory. It is wise, in such cases, to investigate for interfering influences in the patient's habits or environment. Sometimes the same remedy in different potency may be followed by prompt evidence of action. More frequently this will occur when a low potency is apparently inactive and a higher one is used than when the high is followed by a lower one. This requires good judgment in repetition of doses.

*Read before the Hahnemann Round Table of Philadelphia.

Restudy of the case and the original anamnesis is necessary when some of the symptoms disappear, but the condition of the patient does not improve. Such restudy may reveal that the remedy prescribed is only palliative or that it is too deep acting for the period of progress which the disorder has reached in this patient. If it is the latter the patient not only appears not improved, but even worse. The next step may be to antidote or partially antidote, the first remedy with another.

The most satisfactory result of the first prescription is the delight of every physician viz: The disappearance of the symptoms in the proper order (from within out), associated with improvement of the patient. So long as this continues or symptoms change, no added medication is desirable. When such improvement ceases and symptoms present at the time of the prescription gradually return, it is expected that repetition of the same remedy will be followed by similar result. This recurs repeatedly with the differing potencies (usually of increasing intensity). Eventually there will be fewer of the old symptoms returning and others will appear but so long as the condition of the patient improves it is best to adhere to the same remedy, deriving all possible benefit from its power. The wise physician will not change the remedy because the symptoms are changed so long as the previous remedy proves effective. When that remedy ceases to act beneficially, the image will have changed and the new image will form the basis of a newly selected remedy.

Selection of Subsequent Remedies.

Experience has demonstrated that certain of our deeply-acting remedies have natural followers. It is often not difficult for the thoroughly trained student to recognize, in the newly forming symptoms, the image of that remedy, expected to follow the one previously prescribed. We are familiar with the sequence of sulphur, calcarea, lycopodium; of pulsatilla, silica, fluoric acid; of sepia after nux vomica, of calcarea after rhus, etc.

When the previously beneficial remedy is losing its influence, it has been determined that the last appearing of the new symptoms are strong guides in the new image. If this newly-formed image is not recognized, the repertory again comes into use.

In no phase of professional activity is it more desirable for the physician to maintain an unprejudiced mind and fidelity in

noting the symptoms (in addition to sound comprehension) than just at this juncture. In actual practice it is not uncommon to have the patients or attendants refer to the symptoms, appearing after such periods of improvement, as though they were identical to those formerly experienced. Investigation may reveal, however, that the disturbance or the pain may be in the same locality or associated with the same function as previously, and the characterizing features (the modalities concomitants and influence on the patient) are different. The mental symptoms and other symptoms, expressive of the patient may be either partly or entirely different.

The obvious thing to be done is to prepare a new anamnesis from the symptoms present at the time the previously active remedy is no longer beneficial, disregarding the old, in making the new study. It may occur that the image revealed in this fresh repertory study is of a remedy prominent in the first anamnesis, but it may reveal one not emphasized by the previous condition. We must not be prejudiced, to the point of limiting our consideration to those only which were first considered.

Varying Phases of Complicated Chronic Cases.

In the course of several years' treatment of a patient with chronic disorder, it may be necessary to create several fresh anamneses. Such careful practice by conscientious physicians, will eventually determine other remedy relationships and sequences than those observed and bequeathed to us by the masters of former times.

It is in complicated cases that most frequent resort to the repertory must be indulged. In these cases, the effects of the various complications are peeled off (if one may use this expression) in the reverse order of which the complications were sustained. Each carefully-selected remedy, whose effects prove it obviously beneficial, controls the case for a short time; the patient progresses as desired as the symptoms follow the curative order. Then that remedy will do nothing more; some variation has occurred in the characteristics or if it has not it will through patient waiting and observation. The use of the repertory at this point as though it were a new case, will usually be rewarded by a fresh most similar image. Knowledge of the complicating

influences is to be counted important and sometimes included among the general symptoms (those of the patient).

As the symptoms appear anew, we must not fail to inquire "when did you have this before, how long ago, under what circumstances?" If the original record is a complete history, it may include record of such conditions. The symptoms of former times may reasonably be expected to pass without interference. It is only when they do not and form themselves, instead, into a new group that we assume that the preceding curative progress has carried the patient back to that old period in his history and we may count it significant that the disturbances, commenced after that period, have been obliterated. It is not, however, always easy to decide that the time has come when one such period has ended and another begun, calling for new search for remedy.

Frequently, in the complicated cases, it is impossible to collect all the characteristics or all the manifestations to be included in one image. They ramify in so many diverse and not consistent forms of disorder that one remedy will not cover them. Under such circumstances, it may be necessary to use one of the nosodes to establish better order in the expression of the condition, so that a remedy image may be detected. It determines the symptoms to their proper places and ranking, as it were. It is not uncommon to observe that when a nosode is thus used to begin treatment, the strong sense of improvement which the patient experiences for a short time, is only for a short time. Perhaps, even at the first return of symptoms present when it was made, the nosode will not continue the improvement, because its use is merely to settle things in order. In other words, the patient's condition demands the selection of a new remedy, sooner, after beginning with a nosode than after the use of other remedies. By the time this demand is made imperative, the symptom image has become more orderly and repertory study leads to a remedy which covers the characteristics.

Complicating Influences.

The nature of complications that arises in the thought of the reader, is perhaps, the psoric basis with syphilis or sycosis added, or both, in the same economy. A combination of two or

more chronic miasms, from fresh infection or transmission by heredity is most assuredly a complication that requires most careful treatment from the physician, to restore order. We should be disinclined to undertake this without a good repertory for support.

Other influences, perhaps less frequently recognized as complicating factors, are numerous. They include drug miasms, tobacco or other narcotic poisons, pernicious habits, suppressed emotions, mental or physical strain, forced loss of sleep, natural gas, traumatic injuries and suppression of orderly manifestations by drugs (crude or potentized), by liniments or by rubbing, by electricity or osteopathy or any external or purely local treatment, including surgery. Consider that any combination of these influences, one, two or many of them, may have been engrafted onto the original miasmatic condition of the patient, arousing a chain of physical disturbances. It is not to be supposed that every individual suffering such disturbances will be unable to react and obliterate the effects in quick response as to an external stimulation but that many times the effects remain as complications to the previous disturbances is too frequently demonstrated to deny. It is evidence, of course, of strong susceptibility in the patient, but it is to be reckoned with, frequently.

Let him who assumes to treat the victim of such susceptibility and consequent complications realize the task confronting him, and take each step cautiously. Joy over the progresses effected is often checked in the presence of continuing intense symptoms. It is not a light problem always to determine when proper action has been instituted nor just when it ceases.

No difference how frequently it may occur, when the fresh symptom groups arise, if the image is not clearly recognized, the repertory should be the accessory to their study. The previously used remedy may prejudice the thought and judgment without this sound authority. By such careful selection of remedies and their administration, the patient may gradually be conducted backward toward health until the remedy which was demanded, before any of these complications exerted their influences, become manifest in the symptom image of the patient who has, through all, gained slowly in comfort and power.

It is ever to be acknowledged, however, that the best repertory is but an adjunct to familiar acquaintance with the doctrines of the art of healing. It is not a substitute for definite knowledge. To use it with success demands all that forms the basis of successful application of the *materia medica*. No test for this knowledge can be found more searching than the problem of restoration to health of the complicated cases.

30 North Second Street, Harrisburg, Pa.

SPECIAL ARTICLE

*THE MEDICAL TREATMENT OF TUBERCULOSIS.

By Lewis P. Crutcher, M.D.

THE TREATMENT OF TUBERCULOSIS, be it hygienic, dietetic, climatic or therapeutic is fraught with grievous disappointment to the practician of the Healing Art and causes him to look about for help like a scared child, "crying in the night, a child crying for a light, with no language but a cry."

He looks toward hygiene but to behold all the hideousness of a cruel economic state; he gazes toward dietetics but to see the patient who hungers not; he turns toward climatic change to find that it offers but passing relief, and finally he holds out a pleading hand to therapeutics but to turn away sick at heart.

Then in desperation he fumbles in the dark for his toys and plays the while with microscope, reagent, bacillus, eye-test, and other diagnostic "ships that pass in the night," biding his time while there comes with cruelly slow tread the dawn of that day when humanity shall practice less of damning greed and more of the *prevention* of tuberculosis and kindred ills.

But he awakens from his utopian dream to find himself confronted by a condition rather than a theory, and he sets himself seriously to the task of curing his patients instead of quarreling with the social order of which he is a negligent part.

And again he turns to therapeutics with greater hope and a stronger heart, and asks if it has spent itself in the paramount battle of the ages, if indeed it is content with its many victories over lesser foes while tuberculosis stalks about unchallenged and unafraid.

But then he remembers that therapeutics has offered her armamentarium times without number and that he would not heed her call. She offered the silent dart, but the roar of the cannon was music to his ear. She offered the arrow, but the spurt and smoke from the mortar was pleasing to his eye. She offered the rifle with its unerring precision, but he chose the blunderbuss

*Read before the Kansas City Homeopathic Medical Society March 9, 1909.

with its cargo of shrapnel. She suggested individualization and strategy, but he would win through main-strength and awkwardness; she said I have a separate plan of attack for each individual case, he said, I must have a *specific* plan applicable alike to all cases of tuberculosis for I am given to the attempted use of specifics in other maladies, and she did not deny that many crimes are committed in her name.

Then there followed a new era in the medical treatment of tuberculosis for generalization was supplanted by individualization, simplicity took rank over complexity, therapeutic law was enthroned where empirical chaos had reigned supreme.

And the practitioner who had been a law unto himself, took a law unto himself, and guided by this immutable principle he digged deep into the confines of a scientific *materia medica* to find there the hand-maids of accurate therapeutics, each awaiting but an opportunity to do yeoman service against the arch enemy of the race.

And he found that each presented its own indications for administration and he knew these indications to be trustworthy because they had been determined without the colorings of Pathology, and so also since these indications had been determined, without the hindrance of abnormality, their cure work was not to be hindered by any other drug, acting upon the patient simultaneously.

And he came to the further consciousness that the finer drug indications were made possible only through the effects of the gentler dosage and he gave heed to the censure of an outraged therapeutics and henceforth lead his patients from their tuberculosis by milder measures, instead of bombarding tuberculosis with frequently repeated massive doses of medicines whose chief indication was their nastiness. And he gave heed to the usefulness of fresh air, wholesome food, cleanly environs, and other ministering angels of *Vis Medicatrix Naturae*.

And his new mission was to help rather than to hurt, to cure rather than to kill, to eradicate rather than to palliate, to walk uprightly in the path of therapeutic certainty rather than to gallop blindly in the wake of the passing fad.

And he ceased to believe that the great white plague is a sure passport to the great white throne.

Kansas City, Missouri.

CONTRIBUTED

MODERN METHODS IN THE PRACTICE OF SCIENTIFIC (?) MEDICINE.

J. M. S. Chesshire, M. D.

WHOSOEVER tooteth not his own horn the same shall not be tooted, therefore lose no opportunity to boast of the number of desperate cases you have had and of your marvelous successes in restoring them to health.

Emphasize the fact that you are a **VERY** busy man and that the health of the community is wholly due to your indefatigable efforts.

Be sure to make it known that you were called in the "nick of time" and that in the hands of a less skillful person the patient would surely have been turned over to the tender mercies of the undertaker.

Keep the nurse or attendant busy regardless of whether anything is accomplished or not. It has a good psychologic effect on the patient. Then if the patient succumbs you will have the credit for doing all that could be done.

People like to be humbugged and the more you humbug some people the better they like it. Some are slow to "catch on" and just think of the harvest you can reap in the mean time.

Take for your motto the following:

Tickle the public and you make it grin,
The more you tickle the more you win;
But teach the public and you'll never grow rich,
But live like a beggar and die in the ditch.

If you have a conscience do not use it. A doctor has no business with such an impediment. It is disastrous to his financial welfare.

If you are a Hahnemannian do not let it be known. People will scoff at you, say you are not scientific nor up-to-date and will consider you a back number.

Do not study your cases for it takes too much time and is considered an indication of ignorance. Better spend your time in the poker room or pool room getting acquainted with the boys. They may need your services sometime and it pays to have a "stand in."

The following method of case taking is sufficient in most cases: Feel the pulse; ask to see the tongue; and inquire about the condition of the bowels. Scratch your head, run fingers through your hair, look wise and say as follows: Your liver is out of order, the bowels are in a paralytic condition, there is a hyper-acidity of the stomach, the opsonic index is very low, there is also a decrease of haemoglobin in the blood, an impairment of the nerve centers, and congestion of the nerve centers and congestion of the cortex. I am making a specialty of this class of diseases and have taken instructions under some of the best men in the country. Besides that I have all the latest and best works along this line and can give you just as good treatment as you would get from the best specialists in the large cities. It takes time to accomplish results in a case like yours and you only lose time and money by going from one physician to another. Follow my directions, do not get discouraged nor expect results too soon, *persist* in the treatment, and in time you will be all right. Then give the patient four ounces of manola, with instructions to take teaspoonful four times a day, and to come back for more when that is gone. (Of course, the patient should not know what you are prescribing). Pocket your fee, look wise and wait for the next sucker.

You are not supposed to confine yourself to the truth at all times; in fact, the farther you wander from it the more successful you will be.

This advice is given after a close observation of the apparent methods of other physicians whom the laity call successful.

I have not followed it in my practice and possibly that is the reason my bank account is no larger than it is and that I am still using a horse and buggy instead of an auto. But it is some satisfaction to me to have a clear conscience and be able to rest in peace when my day's work is done.

Peabody, Kan.

OPEN LETTER ON THE INSTITUTE JOURNAL.

"Read, not to deny nor confute, nor to accept and take for granted, but to inveigh and consider."

TO THE MEMBERS OF THE INSTITUTE: The following brief is offered in advance of the Detroit meeting, at which time, according to the contract, the Journal matter is again to be brought before us.

An official journal for the Institute was first proposed in the presidential address of Dr. B. F. Bailey, at the Atlantic City meeting of 1899.

At the Chicago meeting of 1905 the president, Dr. Royal, again advised it and a committee was created, to report at the next session.

At the Atlantic City meeting of 1906 Dr. Green, in his presidential address also favored it and the committee appointed the preceding year reported affirmatively, but after full and free discussion over parts of two sessions the report was laid upon the table.

Thus it will be seen the subject had not been acted upon hastily. It had been advised by three presidents, had been reported upon favorably by a committee appointed to give it special consideration, had been discussed over two session, and had been rejected.

Under all parliamentary law and usage this action dissolved the committee. Nevertheless, for some unexplainable reason it refused to stay dead and was continued on the program, reporting "progress" at the Jamestown meeting.

Since it was tabled at Atlantic City the subject has never been properly nor legally before the Institute, it never having been regularly taken from the table, so far as the records of the Institute show.

Notwithstanding its previous thorough consideration and rejection, at the Kansas City meeting, with but fifty-one present who had been at previous meetings at which the subject had been considered, and with an unusual proportion of new members and others who rarely attend, two reports bearing upon the question were offered.

The Committee on Promulgation of Homeopathy tendered the following suggestions: (The italics are all mine).

“Only a first-class publication would answer the purpose; *anything short of it would be a waste of time and effort.*”

“The fact that a journal endorsed as the official organ of the Institute and national in scope can at once begin with a fixed and large list of bona fide subscribers, and is thus from the start in a position to command excellent advertising patronage at good rates, has a *fixed monetary value which some reliable house could be made to appreciate.*”

“Experience proves that a *weekly publication* of not less than forty pages, standard size, would not only be needed to make a desirable journal, from a professional and literary stand-point, but that it would obtain better rates for advertising than a semi-monthly.”

“The publishers should not be physicians and members of the Institute; *friction would result* and do the Institute permanent injury.”

* * *

Then followed the report of the Journal Committee. It advised that there “shall be made in the name of the Institute a contract for not more than five years with *some reliable publishing house* to publish a *weekly journal* of not less than forty-eight pages.”

“To contract to obligate the Institute to no financial responsibility beyond the amount of \$2.50 per annum for each member in good standing, in the Institute, *each such member to receive a copy each week.*”

Discussion followed upon these reports, for which see pages 67-71 of the forthcoming Transactions, and the reports were adopted.

* * *

What has transpired since is as follows:

The committee sent out impossible specifications—there wasn’t a journalist on it—and received no homeopathic bids. An editor’s salary of \$3,000 was stipulated, a forty-eight page weekly journal was specified, surveillance over the advertising

was demanded, the editor was to be under the committee's supervision, and general control over the Journal in the Institute's interests was indicated.

The expenses would have approximated \$14,000.

For this the Institute was to have guaranteed \$5,000.

The remaining \$9,000 was to have been made up from advertising and outside subscriptions.

Nobody wanted the job.

Several homeopathic journals were ignored in the matter, notably the North American Journal of Homeopathy, which had opposed the project at Atlantic City and at Kansas City.

* * *

Finding it impossible to act successfully upon the basis the Committees had outlined at Kansas City, and which the Journal Committee had assured the Institute was easily possible and already an assured success, a consultation was called at Cleveland in October.

To this the *Medical Century* was invited, *but no other homeopathic journal.*

At this time it was learned that the Lippincotts had made a tentative offer, but it was not considered because the Lippincotts published allopathic journals and books.

A Kansas City house also tendered an offer, accompanying it by a bond for faithful performance of contract, but it was not considered for like reasons.

Both had been asked to bid.

At this Cleveland consultation a contract, such as it is, not worth the paper upon which it is written, "for reasons too numerous to mention," and which the Institute will be called upon at Detroit to reject or confirm, was entered into *upon altogether a different basis than that proposed, begged for and voted at Kansas City*, and for altogether a different periodical.

* * *

Then we were to have a weekly journal by a responsible publishing house, at \$2.50 per annum per member.

Now we are to have a monthly journal at \$2.00 per member.

Then we were to have a publisher not a physician, lest friction result and the Institute receive permanent injury.

Now we have a publisher at once a physician and member of the Institute, and friction *quantam sufficit*.

Then we were to have no unethical advertising.

Now that only is rejected that does not promise the improbable.

Then the papers and discussions were all to have a place.

Now Section 6 of the contract gives the editor complete control.

Then the contract was to have been made with some reliable publishing house which would appreciate the considerable monetary value of the Institute's prestige and fixed subscription for five years.

Now we pay \$5,000 to one of our already established journals to change its name and dress and reduce itself in size.

The Century Company gets it all—the Institute nothing for its unquestionable assets.

Furthermore, the Institute was compelled to pay \$1,250 in advance to assist in the remarkable contortion of size-reducing, this indicating that the "reliable publishing house" idea had been altogether ignored.

* * *

I am prepared to establish by incontrovertible evidence that the Institute can publish the present Journal—printing, postage and mailing—for less than one-third what it pays now.

I am also prepared to establish by equally reliable evidence that the Institute can issue a semi-monthly for what it now pays for a monthly, and make all the advertising clear.

I am also prepared to show that neither party to this contract, involving \$25,000 in five years, is legally competent to enter into any such contract and that upon this contract neither party to it has any standing in court.

It may also again be safely stated that by establishing an Institute Journal at all we not only destroy the real value of our transaction as such, but that we also antagonize or invite the

indifference toward the Institute and its work of nearly or quite all the existing journals—thus with the one nullifying the Institute support of the twenty.

Can this be wise?

* * *

Large experience as a journalist justifies the view that all our non-official periodicals, everyone of which is needed for the local and general propagation of Homeopathy, will suffer a decrease in both subscription and advertising patronage if the Institute sets itself up in journalism. Advertisers will naturally consider an official organ of a national society the best advertising medium of the body it represents, while subscribers will in many instances give up journals for which they have to pay if they are able to get the Institute Journal in connection with their membership fee. Which may be the more necessary to the general welfare of the cause, the one exceedingly prosperous with the others injured, or the entire lot on their own surer footing?

Quoting from memory, the following journals have been altogether ignored in this mattter:

The New England Medical Gazette.

The North American Journal of Homeopathy.

The Hahnemannian Monthly.

The Homeopathic Journal of Obstetrics.

The Homeopathic Journal of the Eye and Ear.

The Cleveland Medical and Surgical Reporter.

The Medical Conselor, Detroit.

The Clinique, Chicago.

The Medical Advance.

The St. Louis Homeopathic Reporter.

The Critique, Denver.

The Progress, Denver.

The Iowa Homeopathic Journal.

The Pacific Coast Journal of Homeopathy.

The Homeopathic Recorder.

* * *

The Institute's Journal Committee begged, plead, argued for a weekly journal and have given us a monthly. They assured us that the psychological moment had come for it, that it was eas-

ily possible, that it would do great work for the Institute and Homeopathy, that as the American Medical Association had consolidated that profession so our new weekly Institute Journal would consolidate ours. They pointed out the large money the old school Journal had made for that body, so large that it did not know what to do with the profits, and implied that our journal would do likewise for us. They made bold to proclaim that the matter had received due consideration, had been thoroughly discussed, that all the pros and cons had been weighed, and waxed somewhat wroth when this matter of "due consideration" was questioned.

Now the first "Whereas" of the contract admits that after this same sort of consideration a weekly has been found impracticable, but instead of so reporting to the Institute and asking for further instructions they seem to have been so bent on a journal, whether or no, that they have, wittingly or unwittingly, about completely surrendered the whole subject to one of our journals without giving any other the slightest consideration upon the monthly basis, to the manifest affronting of almost all the rest without in any sense securing to the Institute any of the splendid things which were promised it at Kansas City last June.

There are some phases of this subject that can hardly be properly discussed through an Open Letter or in the journals. In fact, it is doubted if some features of it would not better be threshed out in the courts than to bring all of them before the Institute. The whole transaction seems to have been characterized by slipshod business methods, and the Institute may well consider, while not yet too late, whether it will not be well to adhere to the original well-digested opinion to keep out of the journal business altogether; or, if it adheres to the late snap judgment to have a journal of its own whether it will not be well to give all our journals and outside publishers an equal opportunity to do something better, and financially of greater advantage than this contract with the Medical Century Company does for the Institute.

C. E. FISHER.

April 15, 1909.

S E L E C T E D

KENT'S REPERTORY.

By Dr. Gibson Miller.

IN the early days of Homeopathy, when the proven remedies were few, it was possible for the average man to carry in his memory the majority of the symptoms, but as remedy was added to remedy, until the number of symptoms became appalling, this became an impossibility, and resort had to be made to repertories or indices.

Many have tried their hand at the compilation of these repertories, and standing head and shoulders above them all was Bœnninghausen's *Pocket Book*, though it only covered a part of the field, viz., 125 remedies, and was not detailed enough for many of our requirements. The Lippes were the first to attempt to produce a repertory of all the then known remedies, but even they only claimed to have recorded the more characteristic symptoms.

Over twenty-five years ago James Tyler Kent, finding that even this repertory was very imperfect and full of errors, began for his personal use to expand and correct it, and while a student under him in St. Louis, I had the privilege of copying his manuscript notes.

Being strongly urged by those who felt the necessity for a complete repertory, he reluctantly agreed to undertake the task, and the result of all these years' labors is now given to the world. Only those who have essayed to do similar work can realize the strain on brain and eye and body it involves, and it is little wonder that Kent's health several times broke down, but it was a labor of love, and nothing could alter his determination to complete the work.

The first edition appeared about ten years ago, and now we have the second, which is no mere republication, but a book revised from beginning to end, with the addition of much new matter and the correction of the many errors inseparable from this class of work.

When forwarding this second edition he wrote:—

“The first edition was largely a compilation from other

repertories. I took and accepted what I thought had been from good authorities, but use showed that there were many errors even in Boenninghausen. I therefore had to scrutinize very carefully and trace disputed points back to some source. It was possible for me to do so, as I have all the old first provings that are known. Boenninghausen often disagrees with Hahnemann's original symptoms in matters of aggravation and amelioration. I have accepted Hahnemann as first, best, and final whenever a dispute occurred. Many errors were found in Lippe's, also many in Lee's Cough Repertory, and other minor works. Therefore you will find many remedies omitted that were in the first edition."

The foregoing excerpt indicates the extreme care that has been exercised in the production of this book; and when comparison is made with many other repertories, some of which, a critic declared, contained 30 to 40 per cent. of spurious symptoms, its absolute reliability will be evident. Many clinical symptoms have been included, but only when recorded by reliable observers and consistent with the nature of the remedy.

One of the most valuable features of the book, and one that could only have been properly performed by a master in homeopathics, is the grading of the remedies—the most characteristic being given in Roman type, the second in italics, and all the others that have the symptom only in the lowest degree in ordinary type.

A good workman can often do fine work with very imperfect tools, but he who would obtain the best results must supply himself with the finest to be had, and spend much time in learning how to use them. This book is an expensive one, but the improved results following on its intelligent use will quickly repay the outlay.

To those who look upon homeopathic prescribing as a simple and easy thing that can be learned in a short time and with little effort, this book will be of small service, but to those who appreciate the genius and scope of Homeopathy and realize the necessity, if the greatest results in the cure of disease are to be obtained, of minute and incessant study, it will prove to be one of their most precious possessions.—*Homeopathic World*, London, England, March, 1909.

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

UNDER DATE OF MARCH 26, 1909, Dr. W. V. Foster, President of the A. I. H., has issued the following circular letter to members thereof. It sets forth fully the urgency of concerted action on the part of all for the furtherance of the cause of *simila* and a united effort to upbuild the membership of its organization. Look up some good brother and induce him to become a member before the forthcoming con-

vention at Detroit. The letter of itself is self explanatory and needs no comment whatever:

Dear Colleague: The time for the Sixty-Fifth Annual Session of the Institute is near at hand; this is a crucial period for the interests of Homeopathy, especially for our Colleges: some of these require support and strengthening: the Allopaths, through the American Medical Association are using every means to eliminate SIMILIA from the face of the earth. We need the advice and active co-operation of our wisest counselors: many changes in our policies are pending and must have the approval of the Institute. The Executive Committee has exerted its best endeavors to carry out the instructions given at the last meeting, resulting in legal incorporation; this will demand the formulation and approval of new By-Laws.

The Institute Journal has been established; the contract with the publishers will be presented for your consideration—approval or rejection.

Through the Medical Council, the Committee on New Members and by the use of all the other machinery of the Institute, strenuous efforts are being made to extend the influence of Homeopathy and to encourage our brethren everywhere, especially those who are in isolated places.

The Southern Association has had a great revival at New Orleans; this will certainly redound to the good of the CAUSE in all quarters of the Union; this association has a great work to do and should receive the help and encouragement of all our brethren everywhere. The peril of our situation can only be met and overcome by organization and the most active work; beginning in the institute this movement should ramify to each state, county and town in which a Homeopathic physician resides. NOW is the time for aggressive, prompt and hearty co-operation which alone can save us from destruction. **Come to Detroit and aid in this great work.**

Fraternally yours,

WM. DAVIS FOSTER,
President.

THE PASSING OF HOMEOPATHY:

"In our correspondence columns will be found a communication on homeopathy which should be read by every member of the State Society and every graduate of a medical school practicing in Illinois. It should, moreover, be read by every honest practitioner of osteopathy. This communication, of course, came to us unsolicited. It was written by a man who for many years was a teacher in homeopathic schools and was a firm believer in the extravagant doctrines first promulgated

by Samuel Hahnemann. Later in life he took a degree at a regular medical college and got himself straight on the books. This latter degree was hardly necessary, as he had for years used all sensible therapeutic procedures in his practice of medicine and surgery. His action, excepting the taking of the second degree, has been imitated by hundreds of graduates of sectarian schools who have with him recognized the vast importance of modern discoveries influencing medical science. Happily the great body of the profession has recognized the plight of these practitioners and have admitted them as members of local medical societies without hesitation. The fact is that some of the better class of sectarian schools have been giving better instruction than some of the poorer regular schools whose graduates found no trouble passing certain venal boards of health and becoming members of local societies. We believe it is true that a number of men who have taken up with osteopathy in the belief that it really rested upon a scientific basis have found their error and are anxious to advance to a full knowledge of the science of medicine. We have been told that the present desperate efforts of osteopaths to secure recognition by the passage of a law giving them an examining board is largely due to their knowledge that osteopathy has only a minimum of truth as its basis. It is a question whether it would not be wise to admit the better qualified osteopaths into medical colleges and graduate them after a shorter course than is required of medical students who are entering on the course of study and thus hasten the extinction of this wantering sect.

This ex-homeopath has made a strong case in favor of the abandonment of homeopathy; an even stronger plea could be made for the abolition of the sect of eclectics and physio medicals. From the schools of these two combined only 120 were graduates in 1907, and it certainly will only be a few years until their names and schools will be reminiscences as vague in medical history as arminianism and pre-destinarianism are in theological history.

Far be it from us to gloat over the decadence of sects in medicine. In the dark ages of science they seemed unavoidable. Even in the light of the past quarter of a century Christian Science and osteopathy have gained supporters from people presumed to have a sufficiency of gray matter. Rather do we hope for the day when the sunlight of truth shall so illumine the pathway that no deviation will be possible to those outside the hospitals for the insane and feeble-minded.—*Illinois Medical Journal.*

Some one specially interested in the matter, has sent me a copy of the journal containing the foregoing, and I have taken particular pains to peruse the production referred to in the aforesaid's "correspondence column." It is a noticeable fact that

many who have made miserable makeshifts at teaching in Homeopathic schools and still more lamentable failures as followers of "the extravagant doctrines first promulgated by Samuel Hahnemann," find immediate recognition and are advanced to a position of prominence in "regular" ranks just so soon as they renounce and ridicule something which in all probability they were too densely ignorant to either acquire or apply.

This rash rushing into print seems to be the guarantee of genuineness; a sort of burned on the barrel or blown in the bottle requirement religiously demanded from proselytes by the "regular" profession. I have no doubt but that "Physician," who failed to affix his signature to the article calling forth so much editorial comment, because he 'does not care to arouse the slightest feeling' would prove a glowing example of the sort unknown outside his own ward, but who immediately acquire noticeable proportions in the minds of certain medical magazine men, just as soon as they see fit to make their past professional history public property, or, at least, such portion thereof as would prove immaterial if a close scrutiny were made of the same.

The communication by "Physician" contains considerable that would pass for fact, for the simple reason that some of the conditions in alleged homeopathic institutions justify the jolt he attempts to administer to homeopathy in general. For instance, he says: "One institution has dropped the word 'homeopathic' from its title and assumed a new name in no way suggesting sectarian teaching." This, no doubt, refers to the Denver college, but, thank heaven, this omission to designate its devotion in no way lessens the usefulness of the cause it repudiates, any more than its apparent affiliation with "regular" schools increases confidence and respect for the latter.

Some people have an unhappy faculty of deceiving themselves, the result being that one is always uncertain as to how much value to place upon any statement they may make, so when one of this order undertakes to predict so serious a calamity as the "beginning of the end of homeopathy" or any other God-given benefit to the human race, it is well to take their statements with the customary allowance of salt, and to await the predicted dissolution with as much fortitude and fearlessness as is possible for us to exhibit under deeply embarrassing circumstances.

M.

THE CRITIQUE TAKES GREAT PLEASURE in presenting what it has been assured is a true copy of a contract entered into by the Journal Committee of the American Institute of Homeopathy, and (a) The Medical Century Publishing Company, or (b) The Medical Century Company; the former concern's headquarters, according to the text of the document, being 9 East Forty-third street, New York City, while the *Journal* gives Lancaster, Pa., as its abiding place. Added to this the binding signature of the contract, that of W. A. Dewey, states his official title to be "President of the Medical Century Company." These mere trifles of detail are perhaps immaterial, but taken in connection with the amateurish aspect of the document, which is made out more for appearance sake than for practical purposes, may cause the rank and file in the A. I. H., who as a usual thing are asked merely to ratify the "doin's" of the politicians, to sit up and observe the tendency towards "gang rule" launched by the aforesaid Journal Committee, in time, at least, to turn matters into such channels as will provide a medium of revenue, similar to the one which places over forty thousand dollars, net, into the treasury of the American Medical Association annually, instead of the magnanimous (?) prospects of financial benefit promised the Institute in Section 10 of the contract. Please note that The Medical Century Publishing-Medical Century Company promise to pay *one dollar* for each subscriber to the periodical, who is not a member of the American Institute of Homeopathy. As this is the only indication that the Institute is to receive any financial return, no matter though the M.-C.-P.-M.-C. Company may make a million out of the transaction, is proof enough that the only object the Journal Committee had in making this miserable makeshift of a contract, was to subsidize a private enterprise, such as is provided for in the following document:

ARTICLES OF AGREEMENT.

"WHEREAS: At the annual meeting of the American Institute of Homeopathy in Kansas City, in June, 1908, it appointed the following Journal Committee: Benjamin F. Bailey, M.D., of Lincoln, Nebraska, chairman; Joseph P. Cobb, M.D., of Chicago, Illinois, secretary; C. E. Sawyer, M.D., of Marion, Ohio; George Royal, M.D., of Des Moines, Iowa, and R. S. Copeland, M.D., of New York City, with instructions

to arrange for the publication of a weekly Journal with power to act; and

WHEREAS: After due consideration the Journal Committee concluded that a weekly journal was impracticable, but that a monthly journal can be published with much benefit to the Institute organization; and

WHEREAS: In a joint meeting with the Executive Committee represented as follows: W. D. Foster, M.D., of Kansas City, Missouri, president; T. H. Carmichael, M.D., of Philadelphia, Pennsylvania, first vice president; Joseph Hensley, M.D., of Oklahoma, Oklahoma, second vice president; J. Richey Horner, M.D., of Cleveland, Ohio, secretary; T. F. Smith, M.D., of New York City, treasurer, and J. H. Ball, M.D., of Bay City, Michigan, registrar—the two committees decided it was for the best interests of the Institute to publish a monthly journal and that the Executive Committee, jointly with the Journal Committee, have sufficient authority to arrange for the same; and

WHEREAS: The Executive Committee instructed the Journal Committee to make all arrangements.

It is, therefore, stipulated and agreed by and between The Medical Century Publishing Company, of 9 East Forty-second street, New York City, party of the first part, and the American Institute of Homeopathy, party of the second part, to-wit: The Medical Century Publishing Company, party of the first part, hereby agrees to perform the following:

(1) Discontinue the present publication, *The Medical Century*.

(2) Establish in place thereof a periodical of forty-eight pages of reading matter of a size approximately eleven inches by eight inches, suitably printed and bound without colored cover, to be known as the *Journal of the American Institute of Homeopathy*.

(3) To print and mail 2,500 copies of the said *Journal of the American Institute of Homeopathy* as follows: (a) to the members of the American Institute of Homeopathy; (b) the remainder to such other persons or Institutions as the Journal Committee may direct.

(4) To print and mail monthly such a number of copies above 2,500 as the needs of the Institute may require.

(5) To furnish all copies for exchanges, publishers, writers of articles, not to exceed two each, and to reserve a sufficient number of extra copies each month, not to exceed one hundred, for future requirements of the American Institute of Homeopathy.

(6) To furnish illustrating at the request of the Journal Committee and the discretion of the editor, to an amount not to exceed \$100.00 per annum.

(7) To furnish space monthly, besides the forty-eight pages of literary matter, for the table of contents, list of Institute officers, schedule of prices for reprints, and print the index and title page at the end of the year.

(8) To secure the services of Dr. W. A. Dewey, of Ann Arbor, Michigan, as editor of the publication; to permit the secretary of the American Institute of Homeopathy to be associated editor of the publication unless the said secretary becomes a persona non grata to the party of the first part.

(9) To permit no advertising to be placed among the literary pages.

(10) Not to accept less than three dollars (\$3.00) as a subscription to the said periodical, except in the case of undergraduate students, to whom the price shall be two dollars (\$2.00) and to pay the American Institute of Homeopathy one dollar (\$1.00) for each subscriber to the periodical who is not a member of the American Institute of Homeopathy. This shall not apply, however, to subscribers to the Medical Century, now on the list, until their present subscription has expired. Settlements for the above shall be made to the party of the second part quarterly, on the first day of March, June, September and December of each year, starting March 1, 1909.

(11) That the periodical shall appear not later than the 10th of each month of the year, except in case of unavoidable circumstances not controllable by the party of the first part.

(12) That at the end of five years from the date of this contract, the Medical Century Publishing Company, party of the first part, will sell to the American Institute of Homeopathy, party of the second part, the Journal of the American Institute of Homeopathy at an appraised valuation, to be determined by three appraisers, one of whom shall be selected by the party of the first part, one by the party of the second part, and the third by the two chosen, a majority report to rule. Said appraisers shall be appointed not less than six months prior to the expiration of this contract, and their appraisal shall be finished and in the hands of the parties of the first and second part at least three months before the expiration of this contract.

The American Institute of Homeopathy, party of the second part, hereby agrees:

(1) To subscribe for 2,500 copies of the Journal of the American Institute of Homeopathy at the rate of two dollars (\$2.00) per subscription, the same to be paid to the Medical Century Publishing Company, party of the first part, from the treasury of the American Institute of Homeopathy in cash, as follows: The first payment of twelve hundred and fifty dollars (\$1,250.00) to be made December 1, 1908, and the subsequent payments shall be made quarterly on the first day of the months of March, June, September and December of each succeeding year, during the life of this contract.

(2) To pay for such copies used by the party of the second part in excess of the 2,500 hereinbefore provided for at the rate of two dollars (\$2.00) for each and every subscription; payments therefor to

be made commencing March 1, 1909, and quarterly thereafter as hereinbefore stated, upon presentation of vouchers therefor.

(3) That ethical advertising shall be defined as that which does not promise to do the improbable, and the questions thereof to be left to the editor, the Journal Committee, and the party of the first part.

(4) To pay from the treasury of the American Institute of Homeopathy for all illustrating in excess of one hundred dollars (\$100.00) per annum at the cost price, upon presentation of vouchers therefor by the party of the first part.

(5) That in case of disability of the editor, Dr. W. A. Dewey, no editor shall be appointed as his successor without the consent of the party of the first part.

(6) That the editor shall have complete control of the distribution of space of the literary pages and general "make-up" of the periodical.

This agreement shall be for the period of five years from the date thereof, and in case of non-performance of these agreements by the party of the second part, owing to non-endorsement by the American Institute of Homeopathy in subsequent meetings, no obstacles shall be placed in the way of the party of the first part re-establishing the Medical Century and retaining a subscription list in its possession at the time of such non-performance of contract.

Signed by: Wm. Davis Foster, Pres. A. I. H. The Medical Century,
B. F. Bailey, Chairman, Jour. Com. W. A. Dewey, Pres.
J. P. Cobb, Sec'y., Jour. Com. L. L. Carpenter, Secy."

(Note—The black faced type are my own.—Editor.)

Regarding the foregoing flagrant disregard of the rights of members of the American Institute of Homeopathy, as shown in the intents and purposes of the document, I take great pleasure (once more) in calling attention to at least four defective features in the instrument, notwithstanding the very definite and decided declarations which the originators of the conspiracy outline. Two of the defects are technical, while the other two become faults owing to the unreasonableness and unlawfulness of the document:

Firstly.—The original resolution provided for the publication of a *weekly journal*. It seems that thereafter the Journal Committee concluded a weekly journal was impractical, but that a monthly Journal could be published with much benefit to the

Institute Organization. This may have been a real difficulty or a new conspiracy born of an after thought. It seems to me that thereafter the joint meeting of the Executive Committee was clearly *utra vires*, that is, clearly without any right or authority growing out of the original resolution to arrange for the publication of a *weekly* journal. I mean to say that if the members of the American Institute are inclined to object to the contract resulting from the joint meeting of the Executive Committee and the Journal Committee, they would have excellent reasons to do so. Their servants have been too fresh. They have gone away beyond what they had a right to do, unless the resolution appointing the Journal Committee gave them wide discretion. In other words, they have been over-enthusiastic friends and strikers for one W. A. Dewey, or some publisher or other person intimately associated with said Dewey.

Secondly.—If it could be really shown that the name signed “The Medical Century Company” was intended for The Medical Century Publishing Company, the same might be corrected. I would think that the publishing company, at least, would be interested in having such correction made before undertaking to execute the contract. On the other hand, I would think that the members of the American Institute at its next meeting might with propriety desire to be informed just with whom or what corporation a contract had been made by the American Institute. It certainly gives those who may desire to do so a handle for criticizing a very careless piece of work, so careless, in fact, that an entire stranger to the transaction, could not for the life of him tell whether the whole contract was to be with the Medical Century Publishing Company, on the one hand, or the Medical Century Company, on the other. To one inclined to read only the actual lines, however, these would appear to be two very different corporations. I hope that some typewriter has not inadvertently omitted the word “Publishing,” and that such word was actually signed in the original agreement?

Thirdly.—The contract would hardly appear to be enforceable in view of the period for which it is to run, *to-wit*: five years,—being an unreasonable period for such a contract. It is evident that the gentlemen making this contract were aware of this

themselves, for they anticipated "non-endorsement" by the American Institute, and such non-endorsement would simply grow out of the fact that more than one-half and probably all, excepting the ones to be directly benefited thereby, would "in subsequent meetings" place the stamp of disapproval upon what looks not only like a scheme to smother a lot of local medical journals, but also like a scheme in the nature of a trust, for the hatching of which the parties to the contract might find themselves the subject of tender solicitude on the part of some energetic Attorney-General of the United States bent upon suppressing trusts.

Fourthly.—There is just enough of a suggestion of the contract being in the nature of a trust agreement to give one ground for warning the members of the American Institute to keep away from any such a contract, if they desire to escape possible punishment under the anti-trust laws of the United States. While I do not think there is much in this theory, yet No. 10 might be construed to be an effort on the part of certain gentlemen to fix and maintain prices, which, when applied to railroads, coal companies and other "octopuses," is considered a very wicked insinuation.

THE CRITIQUE is not at all afraid that this contract, even though given the unanimous approval of the American Institute, would in any way interfere with a free respiration on its part. My object in assigning so much space to this particular topic at this particular time is that when its consideration at Detroit is called for, each individual present may be prepared to protest against this very neatly contrived plan to present a juicy plum pudding to a private individual already pretty well supplied with homeopathic highballs.

Taking into consideration the number of letters received by me concerning this matter during the past month, as well as the general interest which future developments will, no doubt, create, I am inclined to think that the Journal Committee, the Executive Committee and one, W. A. Dewey, with his Medical Century Publishing-Medical Century Company, have sown a breeze and are quite likely to reap a blizzard along the latter part of next month.

M.

COMMUNICATIONS

CHICAGO LETTER.

Dr. N. B. Delamater, well known by the profession throughout the country, has given up practice and removed to Florida. He will be missed by all who knew him.

Dr. F. E. Glauner, Hahn. '08, has finished his term as interne in Hahnemann Hospital of Chicago and has located in Decatur, Ill.

Dr. G. G. Kelley, Hahn. '08, has located in Elizabeth, N. J. The doctor is well pleased with his choice of location.

Drs. C. A. Washburn and C. C. Burlingame, Hahn. '08, recently passed the Massachusetts State Board Examination and both are located in that state.

Dr. V. T. Carr, Hahn. '07, recently passed through Chicago on his way to Knoxville, Iowa, where he becomes assistant superintendent of one of the state hospitals. He has been at his home in New York for some time past.

Considerable interest is being taken by the graduating class this year in hospital internships. Several have already secured very desirable positions.

Dr. J. T. Kent recently passed his sixtieth birthday. He is looking well and is a hard worker for one of his age.

Dr. Howard R. Chislitt, the dean of Hahnemann Medical College, recently celebrated his forty-seventh birthday.

Dr. C. B. Jared died early in April. He was a member of the Hahnemann Medical College faculty Department of Physiology and had practiced in Chicago for a number of years.

The regular Homeopathic Medical Society meeting was held April 7th, Serum-Therapy and Compulsory Vaccination being the topics discussed. Dr. J. W. Hingston and Dr. H. S. Llewellyn were the essayists.

Dr. A. H. Grimmer, Hahnemann '06, has recently opened a down town office in the Trude building, hours 11 a. m. to 3 p. m. The doctor is a strict homeopath and deserves his rapid advance.

At the recent meeting of the Chicago Homeopathic Medical Society Dr. S. H. Aurand was elected president for the coming year, Dr. McBean vice president and Dr. Cliver secretary.

A large attendance at the graduating exercises and the Alumni Association banquet is expected this year as they are held the same week as the Illinois State Homeopathic Society meeting. The session begins Tuesday, May 11th.

April 16, 1909.

Miscellaneous Matter

Send Us a Personal Item Occasionally

Medical Advance for March very much emaciated.

* * *

Dr. A. F. Swan was a caller at the throne, the latter part of the month.

* * *

Dr. G. H. Stover has been elected dean of the Gross Medical College faculty, Denver, Colo.

* * *

A very able article from the pen of Dr. Lewis Pinkerton Crutcher, Kansas City, appears in the pages of **The Critique**, this issue.

* * *

Hering Medical College, Chicago, Ill., is making a mighty effort to secure financial aid and comfort through the medium of contributions from friends.

* * *

The "Open Letter" from Dr. C. E. Fisher, in this issue of **The Critique**, will prove interesting reading matter to all those interested in homeopathic affairs.

* * *

Dr. Vance Rawson, associate editor of **The Clinique**, has given up his practice in Chicago and moved to Danville, Ky., where he took the practice of Dr. Albert Babendriener.

* * *

The Critique desires to congratulate Governor Shafroth upon his wise selection of Dr. T. E. Carmody as surgeon-general of the Colorado National Guard. Congratulation to Dr. Carmody, too, of course.

* * *

Dr. Harvey Farrington, so numerous notices have stated recently, has purchased the practice and office of the late Dr. H. C. Allen. According to **Medical Advance** this includes the house, horse, carriage, library, etc.

* * *

Telegraph talk tells how Evelyn Thaw, on being apprehended by a process server in New York, was found playing with a snake. The reptile being of the very lowest order of intelligence, is not to blame for the lack of discretion displayed.

* * *

Miss Marian S. Spier, a nurse, kissed a dying patient at Cumberland, Md., so the secular press states, and died several days later from the same malady with which the patient was suffering. A person should be particular whom they osculate with.

THE CRITIQUE.

March number of **The Clinical Reporter**, St. Louis, which reached this office the fore part of last month, was the first one to put in an appearance so far this year. We hope our good friend will continue to favor us with a more regular visit in the future.

* * *

The American Institute of Homeopathy will hold its sixty-fifth annual meeting in the Y. M. C. A. building, Detroit, Michigan, June 21st-26th, inclusive. Institute headquarters will be at the Cadillac Hotel; O. O., and L., at the Tuller.—**J. Richey Horner, M.D., Secretary.**

* * *

The slogan of our California friends, according to **Pacific Coast Journal of Homeopathy**, is "Dr. James W. Ward, of San Francisco, for president of the American Institute of Homeopathy, and Los Angeles for the meeting place in 1910." That listens good to **The Critique**.

* * *

The next meeting of the American Institute of Homeopathy, which will be held at Detroit, Mich., will open on June 21st. This was decided upon by the executive committee at a meeting held at the time the Southern Association convened in New Orleans, last February.

* * *

Dr. M. E. Bren has moved his offices from the Steel block, where he has been located ever since his advent professionally to this city, to offices on the third floor of the Mack block. The doctor is doing a nice business we are pleased to mention, his specialty being nose and throat.

* * *

Mr. E. A. Erickson, member of the junior class at the National Medical School, Chicago, was an agreeable caller at **The Critique** headquarters the latter part of last month. A sojourn on the coast and a short stop in Colorado did much to improve the gentleman's health. Come again.

* * *

The many friends of Dr. J. M. Blaine will regret to learn that he was confined to the hospital several days during last month. When they learn, however, that he was not so completely knocked out but that he could do a poetry stunt or two, that will help out some. Ask him about that addition of his to a popular couplet.

* * *

What is said to be the largest fee ever paid a medical man in California, for services in a single case, will be received by Dr. John W. Trueworthy, of Los Angeles, for attendance upon the late E. J. (Lucky) Baldwin. We think the word in parenthesis should be switched over to just following the John W. in the doctor's name.

* * *

"Have you paid your dues?" is the coy inquiry concluding the postal notification of the April meeting of the Denver Homeopathic

Club. At this session all present told of the mistakes they had made; not all mistakes, of course, but then a sufficiently large number to make it apparent that such things occur in even the best regulated practice.

* * *

Mr. E. L. Lomax, General Passenger Traffic Manager of the Union Pacific, was a caller upon one of **The Critique** family the fore part of last month. It is due the untiring efforts of such men as Mr. Lomax that Colorado always gets a little the best of it in railroad transportation and other matters connected therewith.

* * *

Miss Minnie Goodnow, formerly head nurse at the Park Avenue Hospital, which at one time was called the Denver Homeopathic, took charge of a hospital in some Michigan town after leaving Denver, and for the first time in its history, placed it on a paying basis. It is too bad that the managers of the P. A. did not retain Miss G.; she evidently understood her business.

* * *

If the secular press is to be relied upon, Health Commissioner Sharpley has, ere this, begun a crusade upon "alley cats." The cause for this particular brand of cruelty is, the commissioner declares, that cats—alley cats in particular—carry all sorts of disease germs in their fur. The official in question goes further and asserts, if he had his way, that even parlor pussies would be put out of commission. Poor pussies.

* * *

Dr. Wilbur F. Thatcher, Dallas, Texas, will be of the medical fraternity of Denver until Dr. J. Wylie Anderson returns, which will be sometime in July. Dr. Thatcher is well known to many of the profession in this city and Dr. Anderson's patients will find him a capable and thoroughly reliable homeopathic physician. **The Critique** extends a most hearty welcome to the good doctor from Dallas, and trusts his stay in Denver will be both pleasant and profitable.

* * *

Dr. N. B. Delamater, well known—at least by reputation—to most of the homeopathic profession of this country, has given up his practice after an active participation of over forty years, during which time he made many loyal friends both in and out of the profession. He will devote his time to truck farming for the outdoor exercise and amusement it will afford him. We get this information from **The Clinique** and join our near namesake in hoping he may "live long and prosper."

* * *

The Oklahoma State Institute of Homeopathy held a special session in the parlors of the Threadgill hotel, Oklahoma City, April 15th and 16th. The session was liberally patronized by the profession of the state, among those appearing prominently on the program we notice the name of Dr. S. B. Leslie, Okmulgee. Dr. Leslie is a graduate of the Denver Homeopathic and his many friends in this section will be glad to learn of his success in Oklahoma.

As a token of the high esteem that all other systems of medicine are held, members of the Denver Homeopathic Club were convened in special session on the evening of March 30th, to give cheer and comfort to the proposed osteopathic bill which was before the last legislature. Notwithstanding this noble sacrifice on the part of the aforesaid association, the bill failed to pass, so our osteopathic friends will have to take chances with other schools of practice not included in the "trust." Look pleasant: the worst is yet to come.

* * *

What is termed in the program as a "Big Homeopathic Week" will be a memorable event among Chicago homeopaths from May 11th to 16th inclusive. Sherman house will be headquarters and, besides native notables, Prof. W. B. Hinsdale, dean of homeopathic department, University of Michigan, will deliver an address. The blow out will terminate with entertainment of visiting physicians by Buffalo Rock Tent Villa, the new tuberculosis colony, recently established by the homeopathic fraternity of Illinois.

* * *

Dr. Emma F. A. Drake, for many years prominent as a homeopathic physician and in church, social and philanthropic circles in Denver, left the city the latter part of March, to take up the cause of temperance on the lecturing platform. She will work under the National Women's Temperance Union. Dr. Drake was a one time professor of obstetrics in the Denver Homeopathic Medical College, when this city possessed a homeopathic institution and will be remembered with a great deal of pleasure by the "old guard" of this institution's alumni, all of whom will wish her unbounded success.

* * *

Crutcher, of Kansas City, has sent us program of the thirty-ninth annual session of the Missouri Institute of Homeopathy. From appearance of the same am inclined to think those Missouri fellows will be able to convince the most incredulous that they are homeopaths, without resorting to the customary ocular evidence demanded by people of that state. Dr. Crutcher was chairman of the section devoted to *materia medica* and homeopathic philosophy, and made a very creditable showing in his department. The meeting was held at St. Louis, the 27th, 28th and 29th of last month, and was a decided success.

* * *

Dr. J. Wylie Anderson, business manager of **The Critique**, accompanied by Mr. F. A. Williams, a prominent attorney of this city, departed for the Unimac islands the 17th of last month. Theodore Roosevelt may make a record as a destroyer of big game, but the two gentlemen in question serve notice right here that they will agitate the animal kingdom of the north country somewhat themselves. The guide,

assistant guide and cook engaged by Messrs. Anderson and Williams, sailed from Seattle, February 24th and will have everything in readiness for them on their arrival. **The Critique** hopes its business manager will have a most enjoyable trip and that he will return on the date set, July 1st, improved in health, spirits and otherwise, not that he needs much fixing in any of these particulars, only you know we have to say **something**.

* * *

At the Kansas City meeting of the A. I. H., the Board of Censors was given authority to receive and act upon applications for membership made at any time between the sessions of the Institute. This was so ordered because the Journal of the American Institute of Homeopathy is to issue its first number January 1, 1909, and every member in good standing is to be entitled to a copy. Applicants do not have to wait for a meeting of the Institute to become active members but can be admitted at any time by the Board of Censors and they immediately begin to receive the Journal. So hunt up a colleague who is not a member, have him (or her) fill out the application, send it with five dollars to the chairman of the Board of Censors, Dr. Eldridge C. Price, 1012 Madison Avenue, Baltimore, Md., and he will do the rest. Don't forget this!

* * *

Homeopaths are rejoicing over the fact that the Lord Mayor of London, who is one of their number, has consented to convene a meeting at the Mansion House on March 17th, at which plans will be laid for a great campaign in favor of the doctrines of Hahnemann. At the Mansion House meeting a National Homeopathic fund of £50,000 will be started to carry out the following objects: Foundation, maintenance, and endowment of new homeopathic hospitals, dispensaries, and institutions; provision of homeopathic medical education; research into the problems of medicine on a homeopathic basis; establishment of convalescent homes and open-air sanatoria. Among well-known followers of homeopathy who will attend and speak are Earl Cawdor, Earl Dysart, Lord Donoughmore, and Sir R. W. Perks. "These gentlemen, like myself, are strong believers in homeopathy," said the Lord Mayor, Sir Francis Wyatt Truscott, to a representative of this journal. "I have been a homeopathist for twenty years, and all my children have been treated on the same system. At the same time I am not a bigot, and if I could not secure the services of a homeopath I should call in an allopath. We claim for homeopathy that it is a more scientific system. I do not treat myself, and although a homeopathic dose, if it does not fit your complaint, does you no harm, it is necessary to have a doctor to put you on the right lines. My ailments have been very few and have always answered to the treatment."—The Daily Mail, London, March 5th.—P. C. J. of Homeopathy.

READING NOTICES

O f I n t e r e s t t o E v e r y b o d y

HYPERTROPHY OF THE PROSTATE with urinary blockage is a relatively common condition. These patients should be constantly under their physician's observation and advice. They should be warned of the complications and familiarized with the importance of aseptic precautions, and in the use of sanmetto to avoid the establishment of catheter life.

CATHETERIZATION—Cystitis has been found so often to follow not only a foul catheter but careless catheterism, that it is important to employ the most careful asepsis in the preparation of the patient, instruments and the operator's hands. And if the patient should essay to catheterize himself the above precautions should be enjoined upon him. After catheterization it is well to instill a few drops of a 1/1000 solution of silver nitrate to the trigonum and throughout the urethra, and to administer by mouth sanmetto in teaspoonful doses, in a half wine-glass of warm water every two hours.

CYSTITIS—In the treatment of all cases, rest in bed, with the hips elevated, will often give more or less relief from the strangury and the constant desire to urinate; by elevating the hips the urine accumulating in the bladder flows away from the most congested and sensitive part of the bladder. Some recommend opium and belladonna to control the pain. Heat to the perineum and above the pubis, and hot sitz baths will greatly relieve the tenesmus, and to some extent lessen the congestion of the mucous membrane of bladder. Sanmetto should be freely given, each dose in half wine glass of hot water, and if the urine is acid potassium citrate will render the urine less irritating.

ACUTE PROSTATITIS—In the treatment of acute prostatitis salicylic acid internally in five-grain doses and sanmetto in teaspoonful doses tends to diminish the source of infection, reduce the existing inflammation and encourage resolution. The sanmetto being a mild, soothing resolvent diuretic also tends to allay the suffering of patient. If the urine is acid, citrate of potassium in ten-grain doses will aid in relieving irritation and tenesmus. As further measures for reducing

inflammation, light diet, absolute rest in bed, free movement of the bowels and local application of heat by means of sitz baths, or hot-water bag, should be enjoined. If the sanmetto is kept up urinary retention is not likely to supervene, unless there is a previously hypertrophied prostate; in that case the bladder should be emptied by a soft catheter at intervals, still keeping up the use of sanmetto. The prostate should not be massaged during the inflammatory state, but during the period of resolution massage will aid the process.

ECTHOL—In Ecthol we have a preparation of vegetable origin, which possesses strong antipurulent properties, properties which may be described as specific. Ecthol is nontoxic, so that it may safely be employed by the unskilled, who are thus armed against septic complications. It contains the active principles of two remarkable plants, viz: *Echinacea angustifolia* and *thuja occidentalis*, two American shrubs that have long rejoiced in an extensive reputation as a dressing for wounds. The action of Ecthol is not limited to wounds and suppurating lesions of the integrent. Its antipurulent action is equally manifest when given internally in the acute specific fevers, in erysipelas, and generally in all cachetic states with a tendency to pus formation. It constitutes an excellent dressing for fresh wounds, which are thus protected against septic invasion, but its inhibitory and destructive action on pyogenetic organisms renders it invaluable as a local application to boils and carbuncles, insect stings and bites, ulcers, and for the irrigation of abscess cavities.—*American Medicine*.

WHEN MOMENTS ARE GOLDEN—There are times in the experience of every practitioner when moments are precious—emergencies when there is not an instant to lose. A patient, let us say, is writhing in pain. To alleviate his suffering, the physician must act promptly and with precision. Dependence, in such a crisis, is usually upon a single little hypodermatic tablet. And that tablet—will it justify faith? Is it *medicinally active?* Is it of full strength? Is it *soluble?* These become living questions.

Too much stress cannot be laid upon the importance of solubility. And let it be remembered that flying to pieces in water is not the requirement. Many tablets do that—fine, undissolved particles settling to the bottom. This is mere disintegration, not solution; and such a tablet cannot be depended upon to yield the results that the practitioner desires and expects.

Obviously, the physician should exercise care in choosing his hypodermatic tablets. Let his source of supplies be a house with a reputation for making tablets that are stable, active and of uniform

strength; tablets that dissolve promptly and completely. Let him search out a brand of hypodermatic tablets that meet all of the requirements above set forth, and let him specify that brand!

The largest manufacturers of hypodermatic tablets in the world are Parke, Davis & Co. The hypodermatic tablets of this house are true to label. They are soluble. The materials entering into them are rigidly tested for purity and activity. Parke, Davis & Co.'s hypodermatic tablets are thoroughly trustworthy. Physicians will make no mistake when they specify them on their orders.

SCIATICA—"One of the most common causes of sciatica is rheumatism; so often, indeed, is this the causative influence that some writers include it among the varieties of rheumatism," says Dr. U. C. Underwood of Louisville, Ky. "The treatment of the affection," he states, "includes remedies to counteract the constitutional factor at work in the production of the disease and measures looking to the relief of the pain. As anodynes, opium is to be studiously avoided in all cases. Antikamnia is a reliable anodyne, which does not produce cardiac depression and will give relief without injurious after-effects. In sciatica it is best given in tablet form, with salol. One antikamnia and salol tablet every two to four hours will act both as a curative and anodyne.

Mr. S. P., age thirty-nine, applied for treatment for a most distressing case of sciatica. This gentleman was so racked with severe pain that he could not attend to business, and had to give up all work and was now confined to bed. He drank largely of buttermilk and took antikamnia and salol tablets. These tablets kept him free from pain, and after ten days' regular employment of the treatment he was able to go about his business.

Jennie G., age nineteen, had severe sciatica, which extended all along the course of the sciatic nerve. She suffered a great deal and could not attend school and had been almost an invalid. She was put on antikamnia and salol tablets—one every two hours for the first three days and one every four hours thereafter. She began also to take a cod liver oil emulsion about the tenth day. She recovered entirely within a period of four weeks. Now, after a lapse of four months, she has had no recurrence of the disease."

Denver, Colorado, June 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

THE LAST DROP.

By R. del Mas, Ph. D., M. D.

IF THERE IS ANYTHING annoying to the physician, it is the removal of what is jokingly spoken of as the "last drop," which is entirely absent during the day, and now and then stops and returns again without apparent cause, except when alcoholic drink or bodily exertion seems to account for it. The old school has invented all sorts of contrivances to get rid of the trouble, be it with remedies or instruments; and still its beneficial results are not permanent when they are not nihil.

Its microbic or cellular conception of the malady is the basis of its proceedings and failures here as elsewhere.

The late Hayne says: "Can we do better with our pills? We are certain that we can, if we follow Hahnemann's advice, and treat the patient and not the disease. When we treated gleet (the last drop) as such, our efforts were nil: but since we have treated the patient, taking into account all of his symptoms, we have had better success."

That is the testimony of all our good men. And it is very consoling, indeed, to find, here and there, men who are humble enough to follow the law of *similia*, and publish its results.

Errors in diet and the mode of living may be exciting causes of the affection, and should be carefully eliminated that a cure be perfected. I now remember a patient who noticed an aggravation whenever he drank a glass of beer, spent the night dancing or after sexual excitement.

There can be no discharge without an inflamed spot here or there in the mucous membrane of the urethra, whose location the bougie will reveal. But the testimony of the bougie enters not in the selection of the simillimum. And, if the stricture accompanies the drop, the removal of it will, in some cases, dissipate the gleet, says Hayne, but that it invariably does so, no one of any experience will for a moment consent to. So here we

are with the enemy in front of us, defying everlastingly, because it is well entrenched in the urethral mucosa.

Let us see what hot shots we have at our disposition, and when we should or could use our infinitesimal shrapnels.

Alumina is not often resorted to, because it is not well known. The patient that needs it has a thick, yellow discharge; his urine dribbles, or rather falls perpendicularly, like that of benzoic acid, hepar and silica. Some call that the "dribbling urine of old men." In fact any one capable of developing the symptoms of alumina is nearly as old as Methuselah, if not in years, at least in texture. Alumina, like caladium, is uncertain or rather in doubt as to whether things he knows to exist are real or not. He is in doubt as to his personal identity. If his mind is not dazed, it is in a state of hurry (*argentum nit.*, *lachesis*). People and things do not move fast enough to suit him. His mentality is more patient in the morning. If the straining for a soft stool (*psorinum*, *silica*) were there, the necessity of giving this remedy would be doubly sure. It is advisable to bear in mind that the patient has a very inactive skin that itches readily when warmed up in bed (*mezereum*). Pulsatilla has a yellow, thick drop also, and bland in character. It is one of the most commonly indicated remedies, especially in women. Urination is frequent and the urine flows in a thin stream. The patients calling for this remedy are gentle, mild in disposition, and feel a reerudescence of the trouble if they eat rich food or use tobacco. They can hardly lie on their backs without having a desire to urinate. They are florid (*calcarea*, *capsicum*), warm-blooded, crave slight exercise and open air. If they catch cold or have sexual intercourse the "drop" transforms itself into a thick-yellowish, or yellowish-green discharge. The testicles may be more or less involved (*clematis*, *rhododendron*). The discharge is always bland and extremely offensive. It must be remembered that a cold-blooded individual has no use for pulsatilla. The sexual desire of this patient is quite strong, with long lasting morning erections. If the testicles are damaged they swell up and burn, and the burning extends up along the cord.

Sepia is another very often needed remedy. It is characterized by its painless, milky drop (*petroselinum*, *capsicum*),

which may often appear after urination (petros). The urine is dark and turbid, or offensive. The perspiration is also foetid. The "drop" stains the linen yellowish. The sexual ability is greatly diminished or lost. The affection for his nearest kin is also lost; the back is painful and ameliorated by violent exercise and firm, hard pressure. (Natrum mur. back is better from lying in the dorsal position). His feet may sweat profusely, an acrid and offensive sweat, and he as cold as ice, especially in the evening in bed (phosphorus has knees the bed cannot warm up). The mind is moody, sad, snappish. The stomach is "gone," and food hardly ever fills it up. Warmth is wanted. Natrum mur. wishes to fall in line here also, especially where injections of silver nitrate have not been successful. The discharge is thin, watery and leaves spots on the linen (alumina, psorinum, sepia); salty things, which are craved, aggravate the trouble. (Potatoes will aggravate the stomach of alumina; frozen food that of pulsatilla).

The patient who is as moody and excitable as sepia, frets and worries a great deal about his condition (phosphorus, sepia); his testicles ache; and his back is relieved by lying flat on it. He is warm-blooded, like pulsatilla; but their dispositions are diametrically opposed. His "drop" is necessarily white and thin, and causes itching. It is classed among the painless contributions; but, it may be remarked in large type, that after urination the urethra of natrum mur., burns.

Kali carb. comes in here purposely, although no writer to my knowledge, except my master Kent, has ever set it for the cure of gleet. Like natrum mur. it possesses a "white drop," but his burning is felt during and after urination. They are both very nervous, and may easily start on hearing a door slam: but touch kali carb., and you will see him jump. And again, the back of the latter, which feels as if broken, allows no lying down. Kali carb. is excessively chilly, running parallel to china and psorinum, and when the clock strikes 3 a. m. he listens painfully to the crowing of the neighboring roosters. Natrum mur. has no sexual desire. Kali carb. is so lascivious that although his organs say "no," his mind always says "yes," but any intercourse prostrates him. Argentum met. has a "grey drop," some-

times yellowish, but painless. It is often greenish-yellow. Surroundings annoy him readily (hepar). He is very chilly. Cold, damp weather aggravates him. His right testicle may be affected. He may have a day cough that entirely vanishes on lying down (manganum), and is worse whenever he laughs. You may see him scratch into his ears until they bleed (alumina, kali carb., petroleum, capsicum, sepia). He is lean, nervous, old looking, with many wrinkles (natrum mur., argentum nit.).

Argentum nitricum is wilted also, nervous, cannot walk fast enough, is afraid to pass a certain corner (kali brom., petroleum), has impulses to jump from a height (alumina to kill himself if he sees instruments), and, like his father, argentum met. cannot sleep at night on account of electric shocks that plow and tear his limbs, and force him to get up in order to "walk them off." He is as impatient or hurried as alumina. He wants cold air, cold food, cold drinks (pulsatilla), still, here is a hitch, when he uncovers he feels chilly. He may crave sugar and have a green diarrhoea from it. His "drop" is supposed to be yellow, purulent or thick. But he carries a "brand mark" in that in his urethra he has, (or thinks he has) sticks or slivers, and day or night he passes his urine unconsciously, that is, his urethral mucosa is numb (causticum). After urinating, trying to imitate kali bi., sepia, thuja, petroleum and alumina, he says some urine remained in the urethra. As to thuja, after urination, he feels as if some urine were left in the fossa navicularis.

Nitric acid claims to have a painless drop with slivers also. It is a greenish, purulent discharge, occasionally bloody, very often yellow; fig-warts are very liable to accompany a herpes-like eruption about the genitals and a urine smelling like that of horses. (That of benzoic acid is intensely urinous). The fig-warts are common with argentum nit. and hepar who both have slivers also. Nitric acid is very chilly, easily annoyed and vindictive. He is very apt to have his outer canthi and lip commissures cracked. His anus may be fissured (natrum mur., petroleum, sepia, thuja). He may have taken loads of mercury. Hepar desires to come here because, as already stated, he also has slivers in his urethra. His genitals and the folds of his thighs are moist (natrum mur., petroleum, sulphur) and smell cheesy or

sour, while the organs of natrum mur., sulphur and psorinum stink and those of thuja have a sweetish, sickening odor. His urine falls perpendicularly or dribbles (alumina). He is chilly, over-sensitive to his surroundings, to pain. He is impulsive and abusive, ready to kill his best friend in a minute. He would like to move away and often from things and people that surround him (argentum met). He very likely had a very sensitive running bubo when his trouble began. Now his warts crack and bleed, sting and suppurate, and feel as though they were jagged with sharp sticks. He is scrawny, takes cold readily and his glands tend to enlarge and suppurate, with slivers in them. He may be syphilitic or mercurialized, or both. Natrum sulph. has a liking also for the "last drop," but, like that of mercurius and kali iod., it is thick and greenish, and painless like in pulsatilla. His urine is very fetid and looks like stale beer. It often is frothy, with a mucous sediment. Fig-warts about the anus and foreskin are soft and bleed easily. Those of nitric acid smell offensively and bleed when touched. Those of psorinum itch; those of hepar smell like old cheese or herring pickle. Aurum and aurum mur. tend to develop warts on the scrotum, thuja on the glans and prepuce, and cinnabaris on the fraenum. Natrum sulph. is as full of revenge and hatred as hepar. He is violent in his impulses which tend to suicide, but he resists them and seeks to drive them away by the influence of fresh air. A very peculiar relief, because cold, damp air will cause his chest and limbs trouble, even urinary and abdominal disturbances. When he listens to sweet, soft melodies, he becomes sad. He is subject to periodical occipital headaches and morning diarrhoea (sulphur). The miasm may have already gone to his heart and cause violent palpitations, aggravated from lying on the left side; and his liver feels, when disturbed, very sore if he lies on the right side, with a dragging sensation from lying on the left. Natrum sulph. has many things in common with mercurius, less night sweats, and with aurum less the consummation of suicide, and should be carefully compared.

Kali iod. has a discharge similar to that of natrum sulph; it is also very foetid. In the words of Kent, this remedy and hepar answer well to the needs of the mercurialized; but, if hepar

is chilly, kali iod. is not. If the headache of natrum sulph. are occipital those of this remedy are rather bi-parietal, always relieved by cold and motion. Like pulsatilla and aurum, he wants cold air. He must move in the open air not slow like pulsatilla, but similarly to sepia; and motion never tires him. He possesses not the anxious fastness of argentum nit. If he sits and rests, he becomes tired and nervous. His temper is full of cruelty (*anacardium*). He is as irritable as nux and bryonia. Aurum resembles him greatly. It is queer all these syphilitic cases are either cold or warm, while their king, mercurius, can stand neither heat nor cold. And some will say *materia medica* is not the apocalypsis of the homeopath.

Kali bi. wishes to put his name down in this gallery of "drop-portraits." His product is jelly-like, tough, yellow, white, tenacious and stringy. His urine is full of ropy mucus, high colored, with pain across the back; unable to straighten, more so in the morning on waking. Prostatic fluid escapes during stool (hepar, nitric acid, natrum mur., sepia). He seems not to care whether he is sick or not, entirely differing here from natrum mur. and sepia.

Capsicum must be mentioned in this rapid review and set down as a rotund, florid, indolent, chilly and easy-going individual, with the blood of drunkards in his veins; the disease was not violent in him. Those easy going coaches have not much of inflammable stuff. They were born with live coals set under ashes, and their hearth is continually burning, but slowly. They (the coals and the coaches) do not live long. Capsicum has no stamina in spite of his red cheeks. He has no reaction. (The "last drop" is at home with him). He shrinks from the open air. Very odd, because pulsatilla is not redder than he is, and must have fresh air and motion. Pulsatilla is very condescend-ing. Capsicum is as obstinate as a "long-eared he-haw." Should he ever go away some where, he would feel lonesome the moment he landed there. When he drinks a cold glass of anything he shivers through and through. He is very sociable as long as you do not cross him. He is classed among the impotent. His "drop" is creamy, and during urination his urethra burns. He catches cold very readily, coughs mostly all the time and in

paroxysms; but God only knows how much that cough hurts his head. (*Bryonia*). The cough is felt in distant parts (*sep.*). *Coccygineum* says his joints ache as the cough diminishes. Is there anything as interesting as poor mankind?

Graphites has no sexual enjoyment during coition, and his "drop" is whitish and viscid, gluey like honey. His urine is cloudy on standing, dark brown and offensive. No ejaculation follows coition; but we may also find a retarded or rapid ejaculation. Where surfaces rub together he chafes. His sweat, which is offensive or sour, is acrid, so we are apt to find his genitals raw, bleeding, smarting and oozing a gluey fluid, (especially behind the scrotum, (*alumina*)); his mien is sad. His stool hard and with albuminous mucus. His nails thicken and blacken. His body wants warmth; his eruptions shrink from it.

Silica wants warm wraps, but just enough to keep him warm. The extremes of heat and cold aggravate him; he sweats or is over-heated very readily and comes down with a cold. (*Carbo veg.*, *natrium carb.*). He likes cold food and drinks (*phosphorus*, *pulsatilla*). His face is pale, waxy. His lips peel and crack and bleed. He is as flabby as *capsicum*, but pale. He dreads to undertake anything for fear of failure (*argentum nit.*). If left alone he is timid; if aroused, violent. His skin heals not readily (*petroleum*, *psorinum*, *hepar*, *graphites*) and is generally inactive (*alumina*). If he sweats, it is on the face. It requires much exertion to make him perspire all over; but his feet sweat profusely and acrid sweat. In his constipation he reminds one of *alumina* in his soft stool. He shrinks from cold; he feels chilly even when moving about. His "drop" is thin and foetid. His urine dribbles.

Cedron is noted also for his thin, gleety drop with formication over the whole body.

Petroleum is very sensitive to change of weather (*phosphorus*). He is lean, emaciated. His palms and soles burn (*sulph*). His scrotal eruptions are thin and watery; *graphites* thick and sticky. His tubes itch. His "drop" is white or yellow, and his urethra behind the scrotum itches greatly. Over-acute-ness of senses belongs to this patient. His sweat is quite offensive, and he is as well as *silica*, to be thought of in occipital head-

aches with offensive foot-sweat. If he has diarrhoea he is well of it during the night. Like *argentum nit*, he fears to pass a certain corner. He loses his way on well known streets (*glonoine*). He often wakes up bewildered, he is such a venous patient, and thinks he is two in bed. His eruptions consist in vesicular patches, cropping up again on old eruptive fields. He has a slight burning in the navicular fossa during urination. Hayne says the symptoms of *petroleum* are more commonly found in old men.

Psorinum wears a fur cap even in summer. His contribuition is white or yellow and painless. His genitals are extremely offensive. His skin has a dirty dingy look. He gets sore, raw and offensive here and there, and everywhere. He takes cold in his nose continually, and he blows a yellow, gluey, stinking discharge (*mercurius, silica, hepar*) His flatus smells like rotten eggs (*asafoetida*). His veins are prominent. His skin burns, once warm in bed. He is extremely sad and fears to die a pauper. Wants heat, but not his skin (*graphites* in his eruptions). In the open air he becomes dizzy. Is it not droll? Must get up nights to eat (*phosphorus, natrum carb*); when hungry his head aches, but is relieved on taking food.

Sulphur with *sepia, pulsatilla* and *silica* takes the lead in this "drop affair." His urine forms a greasy cuticle on the surface (*hepar, graphites, petroleum, psorinum, phosphorus*). Feet cold in the day, burning in the night. A burning spot on the vertex of the head (*graphites*). Frequent spells of faintness with hot flushes more pronounced at 11 a. m. Appetite poor and great thirst. Discharge, white mucous. The urethera keeps on a catarrhal condition. The urine smarts, and the smarting lasts a long while after urination. The meatus is swollen, pouty. The discharge is very scant and foetid. The genitals sweat much and are extremely offensive (*psorinum*). Prostatic fluid passed white at stool (*agnus*). The genitals are cold (*agnus*) and itch from eruption (*petroleum*). The erections are feeble, may be wanting, and still the desire remains. Sulphur is the great unwashed and unwashable. He is filthy, ragged and indolent. He will often come after *sepia* and *natrum*. *Thuja* has a "painful drop" with moist, red, offensive warts (*natrum sulph.*). His

discharge is foetid. During an emission his urethra burns (sulph.). The urine smarts, and after it is voided it dribbles with a sensation as though drops of it had remained in the fossa navicularis. There is also a feeling as if a hot liquid passed drop by drop along the urethra after urination. The trouble of *thuja* seems to be confined in the fossa.

Petroselinum deserves a hook here, too, in that, like (*kali bi.*) he has a feeling as if the urine were constantly dribbling along the urethral canal (*thuja*). During urination he feels a burning pain in the fossa also; but *thuja* is more like a feeling of burning drops passing along, or remaining in the fossa. *Petroselinum* has no burning after urination; it is a cutting pain that stays in the fossa navicularis a long while. *Thuja* has that sensation also, but burning goes with it. *Petroselinum* and *thuja* both have a voluptuous itching in the fossa; the former is also noted for his "great, painful and sudden desire to urinate." The discharge of this patient is milky. He urinates frequently. The most of his symptoms are located in the navicular fossa, and should be carefully compared with *thuja*. No mistake will occur if the "generals" of the latter are kept in mind; they will take precedence over the "locals." The "drop" of *thuja* is watery.

More might be added to the above, but this is already too long. It is hoped it will help the "creepers" or beginners, and give them a patient sample of how we must select the simillimum which, as Kent says, must have in its nature the very nature of the disease; but it must also correspond to the singularities of the patient.

Centerville, Minnesota.

INFANT FEEDING.

By O. O. Link, M. D.

THIS SUBJECT is not exactly what I was asked to write upon, but it treats of conditions which favor the development of many diseases and disorders of infancy, consequently I concluded it would not be amiss.

To write a comprehensive paper, a treatise on this subject, would require study and observation and years of experience; not having the advantage of either, I will endeavor to make the best of the means at hand, and beg leave to submit a few facts, which you all know better, possibly, than myself, but if I succeed in fixing a few of them in your mind, or bring to mind those you already know, I will consider the time well spent.

There is only one ideal method of infant feeding and that nature has provided, but even this needs intelligent supervision to make it a success. I wish, first, to consider breast feeding.

Every healthy mother should nurse her child, unless there be good reasons for the contrary.

Some of the contra-indications against a mother nursing her child are as follows:

1. Where tuberculosis exist, either in the active or the latent form.
2. Anemia.
3. Severe cases of nephritis.
4. Epilepsy.
5. Severe complications following labor, either hemorrhage or puerperal septicemia.
6. Where there is an inability to secrete the milk.

I have no patience with mothers who will not nurse their children and leave them in the hands of a nurse in order to have "a good time" as they say.

I have never as yet seen an artificially fed child that exhibited the same love for home and parents as the child fed as nature provides.

As to time and regularity of feeding much has been said and written. It is as a rule not with the healthy breast fed infant that the trouble is experienced, but the sickly one.

I have seen healthy children who ate when hungry and slept when sleepy, no regular time being observed as to feeding. This can be done with such children when the milk supply of the mother is good, but I think the better way is to have a regular time for nursing.

During the first three days of a child's life it needs very little as a rule, and the habit of some of these wise old grandmas of

feeding sweetened water and decoctions of one kind or another is very detrimental. If the child had needed more than the breast secreted, it is very likely that nature would have made some provision for it.

It is to my mind as bad as feeding solid food to a person who has just gone through a severe surgical operation; it is quite a change from the surroundings in utero, for the respiration and circulation have undergone a great change and the digestive power is as yet very weak.

Occasionally there is a strong, healthy infant who may need some feeding before the milk secretion is established, but they are comparatively few, and then a little cream, well diluted, or even boiled water will suffice.

Many cases of suffering to both mother and child can be avoided by careful attention to the care of the breast, the breast being cleaned before and after nursing with a boric acid solution and the babe's mouth swabbed out with a similar solution; cracked or fissured nipples need attention at once as these conditions favor infection of the breast and the formation of abscesses.

One of the surest signs that a child is doing well is a gradual gain in weight and no surer way to ascertain this has been found than by weighing and keeping a record of the same. I do not deem it necessary to tell how to weigh the baby, for everyone knows that. If anyone does not, I shall be glad to explain.

When a child is restless, cries a great deal, nurses for a few minutes then falls asleep and cries again before time for the next nursing, or when the child nurses for half an hour and then quits because exhausted or nurses vigorously for a few minutes and then gives up in disgust, all these are signs that the supply is not sufficient.

Or when the breasts are flabby at nursing time when they should be full and tense.

When these symptoms and conditions are present, with a restless, sickly baby, steadily losing in weight, colicky; stools abnormal in color, consistency and odor, it is well to consider a change, for if artificial feeding has to be resorted to it is bet-

ter to do so while the digestive organs are in a fairly healthy state.

Excessively Rich Milk.

This condition is found as a rule with strong, healthy women who take no exercise and are high liver.

The baby of course is not thriving and the mother imagines that her milk is of poor quality.

The remedy of course is plain to everyone; exercise in the open air, walking being one of the best forms, and a less stimulating diet.

Where the milk is poor in quality and quantity the mother is usually anaemic, frail, care-worn, or over-worked.

It is difficult to get a specimen for examination, but if one is secured it usually shows a specific gravity of 1024 to 1027; cream about 2 per cent., so we can make up our minds that it is useless to continue lactation: but where the specific gravity is 1030 and the cream 4 per cent., quantity fair, there is a chance for improvement by proper diet and rest.

Unbroken rest at night is one of the prime factors. The mother should not have the care of the babe at night, under these conditions, and if feeding is necessary it should be given artificial food so that the mother's rest should not be disturbed.

Massage of the breasts is strongly recommended by some as one of the best means of stimulating the flow of milk.

The diet should be abundant, with plenty of milk, meat, and especially beef. Cocoa, Imperial Granum and malted milk are also useful.

If the condition is due to anaemia, that should receive careful attention.

If improvement takes place and mother and child gain in weight and health, it is best to continue lactation; if not, artificial feeding should be begun at once.

Mixed feeding is useful in weaning, also where the supply is not sufficient but the quality of the mother's milk is good.

Wet nurse is to be thought of, but as it is very seldom available, will not discuss it here.

Will say just a word in passing about the examination of the milk. In an ordinary case all that is needed is a lactometer

and a cream guage and in absence of the former an ordinary urinometer will do, the only difficulty being the amount of the specimen.

The specific gravity should be about 1031 though it may be as low as 1028. The average percentage of cream is about 7, though it may go as low as 5 and 6. A low percentage of cream with a high specific gravity indicates an excess of proteids, while a low specific gravity with a high percentage of cream indicates a low percentage of proteids.

It is generally conceded that the best substitute for breast milk is a modification of cow's milk.

All physicians are familiar with the difference between breast milk and cow's milk; the essential difference being in the proteid and sugar, there being 2 per cent more of proteids in cow's milk and 2.5 per cent less of sugar.

There is also a difference in the composition of the proteids, there being five times more caseine in cow's milk than there is lactalbumen; while in woman's milk there is more lactalbumen than caseine. This makes a great difference in the digestibility and coagulability of the two. There is also a difference of about .55 per cent. of inorganic salts, but when the milk is diluted they are relatively the same.

The formula by which the milk was modified at Cleveland Maternity Hospital, which gives the best satisfaction in general, is Winter's.

Bacteria.

The bacteria found in cow's milk are mostly from the handling and not in the milk as secreted by the cow; reaction of cow's milk is acid, or slightly so, while woman's milk is alkaline or neutral.

Fat.

In the modification of cow's milk it is best to begin with low percentages of the different ingredients and work up to the standard, than to begin with too high percentages and impair the digestive organs. It is better to begin with 1 per cent. and work up to 4 per cent. by the end of four or five months. Too high percentage will cause indigestion; vomiting; gray or white stools of foul odors.

Sugar.

These furnish the carbo-hydrates and 7 per cent. seems to be almost constantly found in breast milk, hence we add enough sugar of milk to bring it to the desired amount.

Proteids.

This is the most important as well as the most difficult part of the modification of cow's milk, because they differ and cannot be made to be identically the same; a great many ways have been suggested and tried to overcome the curdling of the milk in such large masses in the child's stomach; but the addition of lime water or sodium bi-carbonate is the simplest as well as one of the most difficult.

Other means are the predigestion of the caseine or its coagulation, by rennet and then removing it, but this does not strengthen the digestive organs though it may be a very good means to tide the child over for awhile, at least, until the organs are capable of doing their work.

If the milk is to be predigested it is better to use a powder that can be added to the milk about fifteen minutes before each feeding, and the balance of the work be completed in the stomach.

The trouble usually arises from too high percentage of proteids in the beginning. Begin with a low percentage and increase gradually.

Regarding vomiting, constipation, colic and curds in stool, the remedies helpful in these conditions would require much time and I hope the readers of this paper will take up and discuss them in the pages of THE CRITIQUE.

Shawnee, Oklahoma.

SPECIAL ARTICLE

WHEN THE MATERIAL ELEMENTS OF A DRUG HAVE BEEN
ELIMINATED BY POTENTIZATION, WHAT IS LEFT. NO. 3.

By J. C. Holloway, M. D.

THE extraordinary power of medicines which results from dynamization, belongs strictly and exclusively to Hahnemann and Homeopathy. Hence, Homeopaths should understand and appreciate the spirit-like power of drugs as contrasted with their crude, material power. Indeed, every Homeopathist *must* acquire this knowledge, ere he can teach the true principles and duplicate the cures of Homeopathy as taught and practiced by the master. The so-called Homeopath who discards potencies beyond the 12th is not sensible of his misery, though infected with that loathsome disease known as mongrelism. I submit that no man can properly estimate disease and disease cause, so long as he looks upon the material elements of a drug as representing its curative power. But here recurs the old question: "When the material elements of a drug have been eliminated, what is left?" The answer of the materialist, of course, is *nothing*. But let the founder of Homeopathy put in a word just here: "It is especially in the form of vapor by olfaction and inhalation of the medicinal aura that is always emanating from a globule impregnated with a medicinal fluid in a high development of power, and placed, dry, in a small phial, that the Homeopathic remedies act most surely and most powerfully." (Organon foot-note page 195).

It would seem that every Homeopathic physician in the land would eagerly grasp the secret as to how his remedies will act "*most surely and most powerfully*," as soon as revealed; and here is the revelation and by the founder himself. Let us see how many will accept it as a working rule throughout his professional career. Here is the revealed secret:

(1) If a globule is impregnated with a medicinal fluid in a *high development of power*, and placed, dry, in a small phial,

and received by *olfaction* and *inhalation*, that medicine will act “most surely and most powerfully.”

(2) There is “always” emanating from such a medicated globule a “medicinal aura;” but said medicinal fluid must be in a “high development of power.”

(3) By “a medicinal aura” is meant a medicine in the form of vapor; an exhalation of fine particles from the globule which has been impregnated (medicated) with a medicinal fluid “in a *high development of power*;” and if in a high development of power, said medicinal fluid contains *none of the material elements*. Hence, as to what is left, Hahnemann answers: *Medicinal aura* which the patient is to receive by olfaction and inhalation, as follows: “The Homeopathic physician allows the patient to hold the open mouth of the phial first in one nostril, and in the act of inspiration draw the air out of it into himself and then, if it is wished to give a stronger dose, smell in the same manner with the other nostril, more or less strongly, according to the strength it is intended the dose should be; he then corks up the phial and replaces it in his pocket case to prevent any misuse of it, *and unless he wish it, he has no occasion for an apothecary’s assistance in his practice*. A globule, of which ten, twenty or one hundred weigh one grain, impregnated with the thirtieth potentized dilution, and then dried, retains for this purpose all its power *undiminished* for at least eighteen or twenty years (my experience extends this length of time), even though the phial be opened a thousand times during that period, if it be but protected from heat and the sun’s light. Should both nostrils be stopped up by coryza or polypus, the patient should inhale by the mouth, holding the orifice of the phial betwixt his lips.” And again he says: “A patient even destitute of the sense of smell may expect an equally perfect action and cure from the medicine by olfaction.” And this is the way in which the founder of Homeopathy says Homeopathic medicines act “most surely and most powerfully;” and that, too, in the thirtieth potency which contains none of the material elements of the drug. Do you believe the proposition? Yes, those from whose eyes Allopathic scales have fallen; those who have a clear conception of the Homeopathic philosophy, and those who have come

to understand that it is the drug-spirit, the dynamis that cures, accept this doctrine without reservation. But the materialist scoffs at that which has no color, or taste, or smell, or weight, if we call it *medicine*. Let him learn that "a substance divided into ever so many parts must still contain in its smallest conceivable parts always *some* of this substance, and that the smallest conceivable part does not cease to be *some* of this substance and cannot possibly become nothing." These scientific facts every man must endorse, or embrace the indefensible doctrine of *annihilation*.

The secret power is not in olfaction and inhalation, but *in the development of the inherent powers of the medicinal substance*. A phial even full of the crude tincture could not, when taken by olfaction and inhalation, act "most surely and most powerfully." The medicinal fluid must be in a "*high development of power*." Hahnemann was careful to state this prerequisite. Then the medicinal aura is present. Then the medicinal vapor, like electric sparks as it were, may catch and impregnate a globule, alcohol, or the vital force. This medicinal aura; this medicated vapor; this dynamic force; this drug-spirit, is neither appreciated nor understood by materialists, whether they be mongrels or so-called "regulars." If it is desired to give a stronger dose in order to cure, then we must give a higher potency; but if it is desired to give a stronger dose in order to secure a purely physiological action, or drug the system, or *kill the patient*, then we must prescribe the crude, material, sensible elements of the poisonous drug.

After these elements have been eliminated, however, by potentization, and the dynamic force, which was hidden in the inner nature of that drug has been unfolded and developed, we have in that medicinal fluid the dynamic power of that medicine which, as stated by Hahnemann and confirmed by *all* his faithful followers, "acts most surely and most powerfully." The materialistic mind of the average physician has never conceived this great truth; and as a result he has never been able to satisfy himself, to say nothing of others, concerning disease, disease cause, or the philosophy of cure. Consequently, this class of physicians (doctors) will turn up their noses and pooh-pooh

about matters of which they are absolutely ignorant. They know nothing and can do nothing in cases like the following:

A young married man, wife and babe recently returned from Arkansas. They were all loaded with so-called malaria (whatever that may be), and quinine. They had been under the scientific (?) care of "regulars." The old mother of the young man came in to tell me of the cases and get some "chill medicine." She said they were all chilling every day. She thought they would lose the baby for it was so awfully sick every day when the fever came up. Said it sometimes vomited, but generally had *severe nausea* when the fever started up. Said its little nails were blue and face blue during the chill. I sent the little tot ipecac 1M. She said the mother chilled every morning about ten o'clock, and that *during* the chill she had a very severe cough which hurt her right side; so severe that when she coughed the stitching pain in the side would nearly kill her; and that the only relief she could get was by *lying on that side*. I sent the mother bryonia 200. She said the husband and father chilled at various times. Great thirst during fever, severe cough *before and during* the chill, with drenching sweat following the fever. I sent him rhus tox. 75M. The prescriptions proved to be rifle shots for the mother and babe, for they never chilled again; but only a glancing shot for the husband. He missed his chill a few days when it returned with new symptoms and more severe and with which no medicine seemed to correspond. I saw him then personally. Found he still had cough during chill, but not before; that he wanted to be covered during fever just the same as during the chill, like nux. v. and rhus. t.; but he had other symptoms which ruled these out. After searching several hours with repertory in hand, I decided that his was a mixed case and agreed with no one medicine in the book. Hence, following Hahnemann's advice, I gave him cinchona (1M.) to clear up his case. After twenty-four hours he chilled again. This time the most peculiar thing noticed was he was very thirsty *during the chill*, but in no other stage. He drank large quantities, but during the heat and sweat, not a drop. Also that during the chill the coldness was relieved by the heat of a hot stove. He wanted to get near the hot stove. Remembering what mongrels, "regu-

lars" and all other materialists do not know, namely, that for a chill with thirst for large drinks of cold water, and no thirst in any other stage, ignatia stands alone, I gave him ignatia 1M. to be taken every two hours until he missed his chill—then to be discontinued. Well, he missed the next chill and also every one which has been due from that day to this. Now here were three persons poisoned with Arkansas malaria and "regular" quinine. They had all chilled until they were about worn out. Their chills had been suppressed until they could be suppressed no longer. Nothing short of a scientific cure could fill the bill. This was accomplished by ipecac 1M. in the babe, bryonia 200 in the mother, and ignatia 1M. in the father. I claim no personal praise in these scores of other similar cases, for the reason that any man can accomplish the same results provided he has a fair share of common horse sense and has been taught *pure Homeopathy*. But materialistic doctors cannot cure such cases, and no one is more conscious of that fact than those doctors themselves. When they shake off their borrowed bigotry and ask of Hahnemann, they shall receive; when they become fully conscious of their ignorance and humbly knock at the door of his Organon, with a Kent or an Allen to pull the latch string, it shall be opened unto them. Then and then only, shall they be worthy of the classification: *Homeopathic physicians*.

Galesburg, Illinois.

(CONCLUDED.)

BELLADONNA AS A PROPHYLACTIC OF SCARLET FEVER.—Dr. J. E. Reese, of Lacrosse, Wis., has prepared a thorough review of the literature of this subject and offers the following conclusions: (1) Belladonna is homeopathic to and preservative against the modern form of scarlatina in a great majority of cases; (2) the disease is milder in persons who contract it after Belladonna treatment; (3) Dr. Velsen, of Cleves, declares that when given as directed, the drug is harmless; (4) it is practically the only prophylactic in scarlatina which has a scientific basis and clinical experience to justify its use.—Medical Century.

S E L E C T E D

A PATRON OF THE CRITIQUE writes for the "Prophecies of Mother Shipton." Through courtesy of a friend we are enabled to present the following:

PROPHECIES.

Of Mother Shipton Have All Come True But One.

An interesting fact which may not be generally known is that the things and events predicted by Mother Shipton in 1448 have all come to pass except that referring to the ending of the world in 1881. The latest fulfillment of the seeress's predictions is the successful use of the automobile. Here is the text of the famous prophecy :

Carriages without horses shall go,
And accidents fill the world with woe.
Around the world man's thoughts shall fly
In the twinkling of an eye.
Waters shall yet more wonders do.
How strange! but yet they shall be true.
The world upside down shall be,
And gold be found at the root of a tree.
Through hills man shall ride,
And no horse or ass be at his side.
Under water man shall walk,
Shall ride, shall sleep, shall talk,
In the air men shall be seen
In white, in black, in green.
Iron on the water shall float
As easily as a wooden boat.
Gold shall be found and shown
In lands now not known.
England shall at last admit a Jew,
And fire and water shall wonders do.
The world to an end shall come
In 1881.

C O N T R I B U T E D



ANNOUNCEMENT.

THE TWENTY-SIXTH SESSION of the Southern Homeopathic Medical Association will be held in Hot Springs, Ark., November 15th, 16th and 17th, 1909. We earnestly urge every Homeopathic physician in the southern states to become a member of the Association and aid in the work of propagandism now being carried on all over this country with more vigor than ever before in the history of Homeopathy.

Organization and propagation are more imperative now than ever and it is a duty each one of us owe to the system of medicine we practice, to support our national, sectional, state and local organizations, if we are to maintain our rights before legislative bodies and secure the representation to which we are justly entitled in medical departments of state universities and other medical institutions of this country that are supported by taxation of the public. This can be done if we will all join together and work with this purpose in view.

The benefit of good and successful meetings for the propagation of Homeopathy in the South are already apparent and aptly demonstrated by the results of the last meeting of the Southern in New Orleans, as quite a number of letters have been received from several different states making inquiry in regard to Homeopathic treatment and in every instance they came from places where we have no Homeopathic physician. From this it is but reasonable to suppose that where there were representatives of our school, others consulted with them. This also renders invalid that old excuse, "I can never attend the meetings, so can derive no benefit from the organization," which we so often hear as a reason for not becoming a member of the Southern Association.

The last meeting of the Southern was one of the best held in many years and there is no reason why the next session at Hot Springs should not be even more successful if we will only work to make it so, but we must all work together with this pur-

pose in view. Spasmodic efforts and an occasional good meeting will be of little avail in the work of propagation, they must be continuous, we must have good meetings every year to accomplish our purpose and obtain lasting benefits, else the good one may do is lost before we hold another.

Let us again urge every Southern Homeopath to support the Southern by becoming a member, give it his moral as well as financial support and contribute his mite to the cause. "In union there is strength."

EDWARD HARPER, President.
WM. A. BOIES, Secretary.

MY DEAR DOCTOR: The following is an excerpt from an editorial appearing in the March issue of the *Kentucky Medical Journal*, (A. T. McCormack, Editor) :

"So closely accompanying the action of the New York organization as to appear unconnected with it except to those who recognize the devious workings of the minions of the American Proprietary Association, there have appeared in the least reputable of the privately owned and nostrum supported press, simultaneous attacks on the life, character and work of our peerless national leader, George H. Simmons. That the author of these attacks is a *specialist in the filthiest of human diseases*, seem to fit him for the degrading work assigned him and to those who know his personal spite and venom against the great editor of the Journal A. M. A., his impotence will be his excuse."

I am calling your attention to the foregoing as it is a vile and contemptible slur upon every member of the medical profession who specializes in Urology. "*A specialist in the filthiest of human diseases;*" this expression was employed to throw mud at an individual, yet it slanders *Urology* not the *individual*, for the particular individual anonymously alluded to is exceedingly prominent and beyond any of the insinuations mentioned in the editorial. If Urology as a specialty is classed as the "*filthiest of human diseases,*" by the powers that be in the A. M. A., then the time is ripe for the Urologist to assert himself individually and collectively.

The two great bodies, The American Urological Association and The American Association of Genito-Urinary Surgeons, should consider the matter very seriously. They should seek a proper recognition of their work and should force upon our great National Association the fact that Urology is *not* a specialty in the "*filthiest of human diseases,*" but one which has accom-

plished as great and far-reaching results in the field of medicine and surgery as any other specialty in medicine.

I am addressing you, Doctor, for the purpose of placing this matter before every Urologist of the country, and I consider it our duty to resent such an infamous and detestable attack upon the work of the Genito-Urinary surgeon. Yours very truly,

April 12, 1909.

LEWIS WILL BREMERMAN.

THE "SOUTHERN" HOMEOPATHIC.

THE MEETING OF THE SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION held in New Orleans was one of the most enthusiastic and successful ever held by the organization. New life was instilled. Many new members were added and everyone was impressed with the bright future of the association.

The benefits of successful meetings for the propagation of Homeopathy in the South are apparent and aptly demonstrated by the results of the above meeting, as quite a number of letters have been received from different states making inquiry regarding Homeopathic treatment and in every instance they came from places where we have no Homeopathic physician.

From this it is but reasonable to suppose that where there were representatives of our school others consulted with them. This also renders invalid the excuse "I can never attend the meetings and so derive no benefit from the organization" which we so often hear.

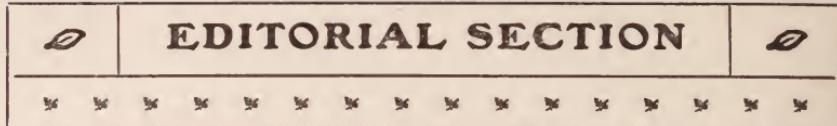
The twenty-sixth session will be held in Hot Springs, Ark., November 15th, 16th and 17th, 1909, and you are earnestly requested to be present. Make your plans to be with us and aid in having another rousing meeting. Enclosed you will find an application blank. If you are not a member, will you not fill it out and send it to me with TWO DOLLARS and I will forward it to Dr. J. T. Crebbin, treasurer; who will mail you a receipt. If you are a member, use it to secure a new recruit. Now Doctor, we need your assistance and co-operation and in order to perfect our plans I wish to ask as a personal favor that you kindly respond to this letter. DO NOT PROCRASTINATE, DO IT NOW.

Members who have not paid their dues for the twenty-sixth that is the coming session, will kindly remit to the treasurer AT ONCE in order that the financial obligations may be met promptly.

Fraternally yours,

Wm. A. BOIES, Secretary.

Knoxville, Tenn., May 12th, 1909.



EDITORIAL SECTION

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

DEATH OF DR. JOSEPH BAUER KINLEY. THE CRITIQUE regrets the death of Dr. Joseph Bauer Kinley, which resulted from accident the 13th of last month. He was attending a banquet given graduates of the College of Physicians and Surgeons, of which he was dean, and while crossing the room to arrange some part of the program with the toastmaster, Dr. McGee, slipped and fell, his head striking the floor so hard as to cause immediately, fatal results.

Dr. Kinley has been a prominent physician of this city for nearly a quarter of a century; was a graduate of a Hoeopathic institution in the East and was connected with the College of Physicians and Surgeons of Denver. This institution was formerly the Denver Homeopathic. He was a Mason of high degree and a highly respected member of the Capitol Hill Methodist church.

He is survived by a wife and two daughters to whom THE CRITIQUE extends sincerest sympathy.

FOR MANY YEARS many members of the American Institute of Homeopathy have looked with longing eyes towards Los Angeles or some other California city, and have entertained the idea that this portion of the universe would be an ideal location for at least one meeting of the National Homeopathic organization. Now that conditions which were so disturbed by the great earthquake have righted themselves, and the homeopathic profession of the Pacific coast is once more at peace with itself and the world in general, it is no more than right that the invitation which our California confreres will extend the Institute at the forthcoming meeting at Detroit should meet with a most hearty welcome and an equally unanimous acceptance.

There is one thing which our California friends will insist upon, in case their "bid" is accepted, and that is that the Presidency of the Institute should fall to the lot of some California man. They go still farther in this very reasonable demand and insist that the person to whom the honor should go be Dr. James W. Ward, of San Francisco.

No man could be mentioned who would give more general satisfaction in this connection than Dr. Ward. He is a man of national and international importance; has shown his loyalty to the cause of homeopathy in so many ways and at so many different times that it would be impossible, in an article of this sort, to enumerate even a limited number of points in his favor. He has sacrificed time, money and professional duties many times to be present at many of the meetings of the American Institute in times past, and on every occasion has made his presence thereat felt for the good of homeopathy in general. THE

CRITIQUE favors Los Angeles as the meeting place of the American Institute of Homeopathy in 1910, and Dr. James W. Ward, of San Francisco, as the immediate successor of Dr. William Davis Foster for President. Here is what the *Pacific Coast Journal of Homeopathy* has to say upon the subject:

* * * * "But to give us a fair chance to insure the full measure of success, they must give us a Californian for President. We "on the Coast" have no hesitancy in admitting that any number of Eastern friends possess to an unusual degree all the qualifications needed and are from every standpoint entitled to the honors of the Presidency. We care not to make comparisons nor to argue the matter beyond the assertion that whenever the American Institute wishes to accept our often-tendered hospitality, they must put the preparatory work for the meeting in the hands of one of our own people. In no other way can assurance be made so doubly sure. The responsible party must be within easy reach, must be on the ground, and must be familiar with Western ways of doing things. An efficient local committee may acquit itself very creditably; but the President himself on the field, and the preparatory work will be carried forward easily and surely to a most satisfactory issue. A President in New York, Massachusetts, or Ohio would be obliged to let things "drift," where a President in California can direct every detail of the work. And we want no "drifting;" we want the assurance of success; and that we would have in the election of Dr. James W. Ward."

THE SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION. I would like to call particular attention to the announcement of the Southern Homeopathic Medical Association, which may be found in our department headed "Contributed." The meeting of this association held in New Orleans last February will go down in history as one of the most effective for the advancement of homeopathy that has been held in any section of the country for many years; it is a question whether the American Institute can boast of as many good results from any one particular meeting as may be credited to this association's last effort, and now they come right back with the announcement that another record breaker is in course of construction and that it will be held at Hot Springs, Ark., November 15th, 16th, 17th, 1909.

Two grand meetings in one year, where heretofore it has been considered almost impossible to hold an annual meeting of any particular proportions.

What is the meaning of all this enthusiasm? Does it indicate that Homeopathy is on the decline?

In our last month's issue I commented somewhat extensively upon an editorial taken from the *Illinois Medical Journal*, headed "The Passing of Homeopathy." It was a touching tribute to the idiotic utterance of some homeopath (?) who had found the following of this faith too much of an effort. It demanded the dismantling of "sectarian" schools and the admittance of the better qualified osteopaths into medical colleges and their graduation *after a shorter course* than is required of medical students who are entering on the course of study and thus hasten the extinction of this *waning sect.* Isn't that a bright and shining example of "extinction" at any cost?

Now insofar as to whether the osteopaths are any more likely to "extinction" than the homeopaths is immaterial in an article of this kind, but I want to serve notice on the "regular" school of medicine right here and now that it will not be necessary for them to make any particular concessions to students from genuine schools of the homeopathic faith; neither will well equipped and thoroughly grounded schools of the latter persuasion hold out any such inducements to osteopathic students as is contained in the suggestion made by the mighty mogul from Illinois. While homeopaths are not to blame for much that is contained in the medical laws of the country, the rank and file propose respecting the laws so long as they are laid down for guidance.

It would be impossible to say too much in praise of our "Southern" society and I trust that many of the methods adopted by this association will find imitation in the transactions of the Institute.

M.

THIE INSTITUTE JOURNAL MIXUP.—No doubt the most intensely interesting feature of the forthcoming meeting of the American Institute of Homeopathy will center about the ratification of a certain so-called contract, made by a certain Journal Committee with a certain well known Homeopathic publication. The Homeopathic press has had more or less to say concerning the matter and I am

pleased to note that to THE CRITIQUE belongs the credit of bringing the business to the surface.

The North American Journal of Homeopathy has issued a large number of reprints of an editorial on the topic. This, with the agitation by Dr. C. E. Fisher, an editorial in the May issue of THE CRITIQUE, along with comments from other quarters, is quite likely to cause a large number who have heretofore paid but passive notice to passing events, to sit up and view the situation with some slight evidence of enthusiasm.

I hope that the suggestions tendered by the Committee on Promulgation of Homeopathy will come in for a good share of consideration when the subject comes up for final adjustment. Inasmuch as the present Journal Committee has shown such an utter disregard for the welfare of the Institute, it is to be hoped that members of that body will be relieved from further participation in deliberations concerning the publication in question, excepting, of course, as they may act within the privileges of an individual member; to further continue anyone of them in the capacity of Journal committeeman would be an insult to the intelligence of the Institute members at large.

Let an editor be selected by a committee composed of the entire body, and remember the suggestion: "*The publishers should not be physicians and members of the Institute; friction would result and do the Institute permanent injury.*"

The flagrant disregard of the above italicised suggestion has already caused some friction, and I doubt whether there be any one so insensible to actual conditions as to assert that the Institute's integrity still remains intact.

After some understanding is had regarding the pleasure of the Institute as to whom it may favor as editor, a committee should be appointed to make the necessary arrangements with some *disinterested* publishing house for the printing, mailing and business management of the venture, with the understanding, also, that each homeopathic publication so desiring, shall have an opportunity to enter the contest on equal footing with all comers.

It is immaterial to THE CRITIQUE who carries off the honors; if W. A. Dewey should succeed in a fair and square competition, I shall take great pleasure in wishing him the greatest success.

Let's have a square deal, no matter who gets the job.

CORRESPONDENCE

CHICAGO LETTER.

Dr. F. A. LaBrech, Hahn. '08, has located in Eau Claire, Wis.

Dr. Margaret M. Dunn, Hahn. '08, has located at Momence, Ill.

Dr. C. O. Zinsmeister, Hahn. '07, has located in Rochester, N. Y.

Dr. R. L. Baird, Hahn. '08, has completed his term of service as interne in Hahnemann Hospital, Chicago.

Dr. E. H. Raschke, Hahn. '06, has moved from Austin to LaGrange, Ill., where he will succeed Dr. Vance Rawson.

Dr. F. W. Sigmund, Hahn. '10, has been chosen as interne for Streeter Hospital, Chicago, for the coming year.

Dr. J. H. Allen, of Hering Medical College, has the sympathy of his many Chicago friends in the recent death of his wife.

Drs. Sweet and McIntyre, for many years located at 70 State Street, Chicago, moved May 1st to the Masonic Temple, room 1008.

Dr. C. S. Tisdale, Hahn. '09, has taken the practice of the late Dr. C. B. Jared at 1245 North Avenue. We wish the doctor success.

Dr. C. J. Breeze, Hahn. '08, has taken the practice of Dr. E. A. Hanke, who died recently. The doctor ought to do well in his new location.

Dr. R. N. Morris has been chosen the new Dean of Hering Medical College to succeed the late Dr. H. C. Allen and Dr. T. G. Roberts is the new registrar.

Dr. G. H. Galford, Hahn. '08, has located at Gibson City, Ill., and is reported to be doing a good business. He recently brought a surgical case to Hahnemann Hospital.

Hering Medical College is giving a course of lectures on "Hypnosis," "Suggestion" and "Psychotherapy" proceeds to be used toward the building of the H. C. Allen Memorial Hospital.

Dr. G. P. Waring, the ex-reformer and editor of the short lived "Crusader," on account of his health, and other reasons, has given up Chicago practice and will leave shortly for a warmer climate.

The graduating exercises of the class of 1909 Hahnemann Medical College took place on Saturday, May 15th, at the Garrick theater. Twenty-five received the degree of Doctor of Medicine and Surgery. The class, though smaller in numbers than usual, makes up for this by the good quality of its members.

Dr. A. C. Copperthwaite, who for the past three years has been on the sick list, has returned to Chicago and resumed practice. He will also be one of the strong lecturers on Materia Medica in Hahnemann College next winter. The students have cause to rejoice over this addition to the Department for next year.

Dr. Vance Rawson, Hahnemann '01, for many years a member of the faculty of Hahnemann Medical College, Department of Surgery, has changed his location from Chicago, to Danville, Ky. Hahnemann faculty has lost a valuable teacher by Dr. Rawson's going.

The Alumni Association of Hahnemann College held its annual meeting and banquet in the New Congress Hotel on the evening of May 14th, with the graduating class of '09 as guest. Dr. Frank Wieland was toastmaster. Other speakers were Dr. A. B. Fowers, president of the class of '09, Dr. B. Hazeltine and Dr. H. R. Chislett.

The fifty-fourth annual session of the Illinois State Homeopathic Society was held at the Sherman House, Chicago, May 11th, 12th and 13th, with special clinics at Hahnemann College on Friday, May 14th. Dr. W. B. Hinsdale, Dean of the Homeopathic Department, University of Michigan, was the guest of the Society on Thursday, the 13th, and gave an address on "Some Present Day Medical Problems." A large attendance from all over Illinois and adjoining states was present.

May 17, 1909.



A Guide to the Twelve Tissue Remedies of Biochemistry.—The Cell-salts, Biochemic or Schuessler Remedies. By E. P. Anshutz. 91 pages. Cloth, 75 cents. Postage, 5 cents. Philadelphia. Boericke & Tafel, 1909.

As a guide to the use of the twelve tissue remedies, the little book above referred to, comes about as near being "what the doctor ordered" as it is possible for a work of this kind to be, especially where the author has paid more attention to facts than extensive detail. The literary side of the subject is handled in Dr. Anshutz's best style, the printing and binding are both work of the very best and the book as a whole should prove of great benefit to those whose tendencies in prescribing turn towards the tissue remedies.

* * *

Vital Economy, or How to Conserve Your Strength. By John H. Clark, M.D., London, England. Edition for America imported by A. Wessels Company, 156 Fifth Avenue, New York.

Here is a book well worth reading and having handy for ready reference. The author, Dr. John H. Clark, London, England, tells an interesting story in a highly interesting and instructive way which merits a large patronage. He has divided the work into nine chapters and has treated the topics of The Bath, Fresh Air, Exercise, Stimulants, Tea, Coffee, The Extravagance of Worry and Visiting the Sick, within the brief space of ninety-four pages in a manner so direct and plain that anyone can absorb it. The book should be in the hands of everybody interested in this important topic, and as this includes nearly everyone, especially mothers, you know the rest.

Miscellaneous Matter

Send Us a Personal Item Occasionally

In case of lightning striking an individual, bathe the face in cold water.

* * *

The next meeting of the Colorado State Homeopathic Society will be held sometime in September.

* * *

The Eclectic Medical Journal is now in its sixty-ninth year of publication with every evidence of "doing very nicely, thank you."

* * *

The meeting of the California State Homeopathic Medical Society, held at the hotel Vendome, San Francisco, May 12th-14th, was a winner in every respect.

* * *

"Proposed Legislation on Public Sanitation" is the title of a little booklet issued by the Illinois Homeopathic Association at its meeting last month. The same is a reprint from The Clinique.

* * *

The Materia Medica bureau of the American Institute of Homeopathy now has fourteen fine papers to its credit, which will make a very creditable appearance on the program if nothing else.

* * *

Dr. J. D. Nye has moved his offices to the Stout block. The building occupied by him on Champa, both for office and residence purposes, has been torn down to make room for a new structure.

* * *

The Hahnemann Periscope, official paper of the associated students Hahnemann Medical College of the Pacific, volume X, number 2, is on our table and as usual does credit to its editor and the publishers.

* * *

The Critique acknowledges receipt of a copy of American Institute of Homeopathy Transactions of the sixty-fourth session, held in Kansas City, Mo., June 22nd, 1908. It is a real pretty book and cost the Institute a pile of good money.

* * *

Governor Shafroth has reappointed Dr. D. A. Stricker, one of the best known and most popular members of the Homeopathic profession in this state, a member of the state board of medical examiners. This should meet the approval of the profession in general.

* * *

The graduating exercises of the college of Physicians and Surgeons, formerly Denver Homeopathic and still some, was held at the auditorium of the Women's Club, Thursday evening, May 13th. The customary limited number of graduates were in evidence on this occasion.

* * *

Dr. John Galen Locke has been appointed on the advisory board of the county hospital, vice Dr. J. B. Kinley, deceased. This is a very good appointment and one which will meet with the approval of a majority of the homeopaths of the city. The Critique congratulates Dr. Locke

The Wabash railway has issued a special folder giving information concerning transportation and other accommodations to be had en route to the Institute meeting and after arriving in Detroit. The picture of the Y. M. C. A. building published in this pamphlet shows the proposed meeting place to be very commodious in every respect.

* * *

Dr. James W. Ward, of San Francisco, for president and Los Angeles, Calif., for the meeting place in 1910 seems to sound good to a majority of American Institute members. Please do not forget this combination when it comes time to vote upon this question at Detroit the latter part of this month.

* * *

At a recent meeting of the powers that be, Dr. David A. Strickler was elected dean of the College of Physicians and Surgeons and Dr. A. H. Early, registrar. Dr. Grant S. Peck was elected treasurer and the hospital committee for the ensuing term is composed of Drs. Locke, Early and J. B. Brown.

* * *

The North American Journal of Homeopathy has "spoke" regarding the Institute Journal matter. **The Critique** desires to say to its ponderous confrere that its "figgers" regarding the printing of the journal are about 40 per cent higher than even this publication would take the job for and we have no doubt but that our estimate can be skinned a mile.

* * *

A butcher in Bowling Green, Ky., had a bad dream recently, during which he stepped from a two-story window in a vain effort to stop a runaway milk wagon. The shock of landing rendered him unconscious, and injured him very seriously. The dispatch ends with the statement that for a long time after the accident his heartbeats seemed to be but three a minute.

* * *

We are pleased to observe that the editorial in last issue of **The Critique**, re the Institute Journal has been placed among the "live wire" products brought about by this controversy. We look for much red fire in the journals of current issue. There may be some cranks besides "Mastin, all alone in Denver" and a few others who have incurred the displeasure of the "doers" of homeopathy in the Institute.

* * *

Dr. C. E. Fisher was a visitor in this city the middle of last month. He was en route to Sterling, where he owns a large ranch and, in all probability, will reside there a portion of the time. C. E. has considerable Institute Journal stuff up his sleeve that it will be worth the price of admission to attend the forthcoming meeting to hear. Fisher is a fighter, when he thinks he is right and in this particular case he knows he is on the right side.

* * *

We received the printed program for the fifty-fourth annual session of the Illinois Homeopathic Medical Association, some time last

month. It was a document of very decent proportions and showed conclusively that the Illinois bunch were not worrying much about the "Passing of Homeopathy" as portrayed by the publication printed in that state and which took occasion recently to pronounce a very touching obituary over this remarkably lively corpse.

* * *

Don't forget that the Union Pacific and Wabash lines run a train out of this city which it will be well for all to consider who contemplate attending the forthcoming meeting of the American Institute at Detroit next month. The Wabash is making unusual efforts to secure this business and will run what is called the "Institute Special" over some portions of its line. Consult the agent of either the Wabash or the Union Pacific in this city for full particulars.

* * *

Five lectures have been given in Chicago during the past two months for the benefit of the Allen Memorial Fund. The first, which was by Paul Pollack, M. D., was "On the Theory and Practice of Hypnotism." The same lecturer discoursed upon the "Therapeutic Uses of Hypnotism," April 23rd. On April 28th Dr. Sheldon Leavitt told all about "Suggestive Therapeutics," while Bishop Samuel Fallow took as his topic "Psychotherapy" on the evening of April 30th. The fifth of the series was given May 7th and consisted of "Steriopicon Views and Entertainment."

* * *

Two postals from Dr. J. Wylie Anderson, one from Valdez, Alaska, and the other from Seward, Alaska, assure us that the business manager of **The Critique** is still upon earth and gives us the further guarantee that he is enjoying himself immensely. He styles himself a **bear hunter** in one of these missives, and all we have to say about the matter is that we will reserve any sympathy we may feel for the bears until more detailed information has been received. Just at present we are not worrying much about J. Wylie being amply able to take care of himself, and serve notice on all the bears in the immediate vicinity of the "hunters" to do likewise.

* * *

The medical graduates from the College of Physicians and Surgeons, Denver, were Elvyn Ray Clarke, Lillian Estelle Clarke, Mary Warner McManus, Bertha Sarah Park, Emma Agnes Scott, Alfred Henry Weitkamp and Mary A. Brockett Ingersoll. Maude E. Autrey, Julia E. Fisher and Belle Martin were given diplomas as graduates from the training school. The valedictory was delivered by Bertha Park, Miss Kline, supervising nurse, presented the graduation pins. The Florence Nightingale pledge was administered by Dr. Charles W. Enos and the address to the graduating classes was by Dr. Frank Gustafson of Chicago, a noted lecturer, connected with the Lyceum bureau. The institutions are the successors of the Denver Home-

opathic college and the exercises last night were the fifteenth annual of the college. Dr. J. B. Kinley has been dean for a number of years, G. S. Peck registrar and Walter M. Dake, secretary.—Daily Paper.

* * *

The Regular Homeopathic Medical Society of Chicago, so a postal sent us recently declares, took in twenty new members at one meeting and claims that other applications for membership are in the hands of the secretary. The program for Tuesday evening, May 4th, 1909, was as follows: What is health? What is disease? What is the relation of mind to matter? Can mind cure disease? How? Can drugs cure disease? How?

These questions were discussed by Bishop Fallows, who presented the Religio-psycho-therapy, including the Emanuel Movement; Dr. Sheldon Leavitt, who presented the principles of Mental Healing, and Dr. H. W. Pierson, who showed how drugs cure a disease in accord with the principles of Homeopathy.

A general discussion followed the presentation. Questions were asked by many present and it is hoped that through this discussion the public received a more intelligent understanding of the most vital questions that may concern the Human Race.

* * *

Death entered the palm room of the Brown Palace hotel last night during the banquet given for the students of the College of Physicians and Surgeons. Dr. J. B. Kinley, dean of the institution and one of the most widely known Homeopaths in the United States, was stricken with apoplexy and died before medical aid could reach him. Seated beside him at the banquet table when the sudden end came was his wife.

Dr. Kinley died when the hilarity of the banqueters was at its height. The speechmaking had just been concluded and Dr. Kinley was laughing and joking with those about him at the table when suddenly he became faint. He asked for a glass of water, but before it could be given him he fell back in his chair, dead. It was several moments before the banqueters realized that death was among them.

The banquet was given by the faculty of the college to commemorate the first anniversary of the birth of the institution.

The college has been unusually successful, due, greatly, to the untiring efforts of Dr. Kinley.

Dr. Kinley, who was born in Germany, coming to this country twenty-five years ago, was fifty years old. He had practiced in Denver nearly a quarter of a century. His offices were at 1440 Glenarm street. He lived at 1212 Columbine street, and is survived by a widow and two daughters, Josephine, aged twelve years, and Margaret, aged fifteen years. Funeral arrangements have not yet been made.—Post, May 14th, 1909.

READING NOTICES

of Interest to Everybody

TREATMENT OF ACNE.—As acne is a chronic disease, and as cod liver oil in the shape of Cord. Ext. Ol. Morrhuae Comp. (Hagee) exerts its best influence in chronic diseases of the skin, by its alterative and stimulating effects on the functional activity of organs, properly administered, it is one of the most reliable remedies in the internal treatment of acne. In anemic cases, it exerts its greatest power.
—American Journal of Dermatology.

ANTISEPSIS OF THE INTESTINAL CANAL.—The gripping pain and flatulence which accompany bowel and stomach complaints, particularly during the heated term, are so readily overcome and controlled by the timely administration of one or two Antikamnia & Salol Tablets, repeated every two or three hours, that it behooves us to call our readers' attention to the grand efficacy of this well-known remedy in these conditions. The above doses, are of course, those for adults. Children should be given one-fourth tablet for each five years of their age. When the attack is very severe, or when the disturbance is evidenced at or near the time of the menstrual period, we find it preferable to give two Antikamnia & Codeine Tablets, alternately with the Antikamnia & Salol Tablets. The latter tablets promptly arrest excessive fermentation and have a pronounced sedative effect on the mucous membranes of the bowels and stomach, and will check the various diarrhoeas without any untoward effect.

SUMMER-TIME IS SPRAIN-TIME.—Some wit has said that "Summer-time is sprain-time." Golf, tennis, base ball and the other outdoor sports inaugurate a season of sprains and wrenches, and ankles, knees, wrists, elbows, shoulders, and backs pay the penalty of a missed drive, an overhand smash or a slide to base. The resultant conditions, the stretching or tearing of ligaments, contusion of the synovial membrane and damage to vessels and nerves, are best remedied by the use of Antiphlogistine, which markedly aids in the reconstruction of the injured part.

By removing the products of inflammation, through the absorption of the liquid exudate from the swollen tissues, and by permitting free circulation of blood through the seat of the injury, Antiphlogistine acts as nature's first assistant. The affected cells are stimulated and toned up through endosmosis, and the process of repair is greatly hastened.

Antiphlogistine should always be applied directly to the affected area as hot as can be comfortably borne, and covered with absorbent cotton and a bandage.

THE AFTER CARE OF OPERATIVE CASES.—It is a fact well established by hematologists, and well known to the surgeon, that a large majority of surgical diseases, requiring operative interference, are preceded, accompanied or followed by hemolytic changes. In addition to the more or less devitalizing effect of the original condition which brings the patient to the operating table, the necessary anaesthesia, if at all prolonged, reduces the hemoglobin percentage and the shock incident to the operation contributes, to a certain extent, to the surgical anemia. Hemorrhage, Suppuration or Sepsis, precedent to the use of the knife, of course intensifies the post-operative chlor-anemia and renders more than ever necessary the employment of hematogenic measures during surgical convalescence. Judicious but generous feeding is of prime importance in such cases and sedulous attention should therefore be paid to the patient's dietetic requirements. Feeding, alone, however, will not hasten recovery as rapidly as a judicious combination of feeding with a hematinic reconstituent such as Pepto-Mangan (Gude). Except in cases in which it is not permissible to introduce food or medicine through the mouth, this palatable, readily tolerable and promptly absorbable organic combination of iron and manganese is distinctly indicated in preference to other blood building agents, because it is agreeable, non-irritant and free from constipating effect. Its hematinic, appetizing and general reconstituent properties are quickly evidenced subjectively, by a general feeling of well-being; objectively, by increased color of skin and mucous membrane, and hematologically, by a progressive increase in the number of erythrocytes and percentage of hemoglobin.

TO ABORT A FELON.—A commencing felon will always be aborted by the local application of alcohol under perfect air-exclusion. Cotton is saturated with alcohol and placed around the affected part and a thin rubber finger stall applied over all. Seventy-two hours usually suffices to give relief or even effect a cure. Dr. Eastman, of Indianapolis, learned this in von Bergmann's clinie in 1897, since which time he has not had occasion to lance a single felon, the treatment of which was begun in time by this method. (Medical Council.) I have used this method with complete success in three successive cases with complete air exclusion for twelve hours only each time.—*Theodore Proxmire in The Clinique.*

VOL.
XVI

ORIGINAL ARTICLE

No.
7

Denver, Colorado, July 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

PYROGEN: ITS FIELD AND THE RESPONSE TO ITS ACTION.*

Julia C. Loos, M.D., H.M.

PYROGEN CHARACTERISTICS.

IN THE STUDY of Pyrogen provings and more especially in the patients, whose conditions demands it as a remedy, the *materia medica* student is impressed by the appearance of certain strong characteristics of several other remedies. In the painful, bruised, sore sensation which makes the bed appear hard, he recognizes arnica, the aching joints and bones recall eupatorium, in the anxiety he perceives a resemblance to arsenicum and the restlessness reminds of rhus tox. When he realizes that all these are present, he does not think of using all these remedies. Pyrogen produces them all, in one image and is demanded when they are all present in a patient at the same time. Not infrequently, however, the recognition of the need of pyrogen will be based on a symptom thus far not observed in any other remedy: the discrepancy in temperature and pulse rate. In simple inflammation, as the temperature increases the pulse increases about at the rate of ten pulsations for each degree of heat. With Pyrogen this relation is varied, there is high temperature with comparatively low pulse rate, or high pulse rate with comparatively low temperature. When this is found in patients, other features will usually be found to corroborate the evidence, in a Pyrogen image.

FIELD OF PYROGEN.

In considering the field of this remedy, the cases suited for its use, any intelligent homeopath would naturally say that its field of usefulness embraces all cases which present its characteristic image regardless of the diagnostic name assigned to the disturbance. This assertion cannot be denied, reasonably. Our present aim is to direct attention to the classes of disorder

*American Institute of Homeopathy, Detroit, Mich., 1909.

in which the pyrogen disturbance is apt to develop. The cases suited and calling for this remedy may be classed in four general groups.

1. Septic conditions, when the symptoms of the patient present no characteristic remedy-image or when remedies selected according to homeopathic indications fail to arouse reaction.

This represents the field of all nosodes. When the system is so depressed or overwhelmed by the poison, of the character of that which is the source of the nosode, so that reaction is prevented, the nosode antidotes the poison, removing the burden which prevents the natural expression of the economy.

2.—Acute zymotic fevers: typhoid fever, pneumonia, influenza (*la grippe*), diphtheria, scarlet fever, dysentery, cholera and any other acute miasms, when the characteristic symptoms are present, are included.

3.—Conditions in which localized, suppurative process occurs, aroused by traumatism or without traumatism.

This includes developed puerperal fever, metritis, suppurative inflammation in bone sinews or mastoid cells, abscesses in any part of the body, local suppuration in any part, whether internal or external, whether in tissues or normal cavities, with ulceration or without, not excepting appendicitis and Bright's disorder, tubercular inflammation in lungs or other tissues, ptomaine or other poisons, conditions following traumatism, not excepting dissecting wounds or other injuries combining poison and traumatism.

4.—Inflammatory conditions favoring or tending toward suppuration disorders developing after suppurative conditions and poisons.

This includes cases presenting a history of some suppurative or poison condition, with apparent recovery, followed later, perhaps long after, by some form of disorder of serious nature, without apparent provocation or from slight exciting influence. It includes also cases seen in the early period when the disorder is not entirely developed but tending toward a suppurative process somewhere. It may not be determined where the localization would occur. In these cases the remedy acts as a preventive, a check to the process toward very serious disturbance.

CLINICAL VERIFICATION OF THE ACTION OF PYROGEN.

A few cases collected from my own practice and from the reports of various other prescribers will serve as illustrations. In some of these the discrepancy of the pulse and temperature shed the first ray of light to interpret the condition and the collections of other symptoms. The potencies used in these cases ranged from 10x, to cmm., Swan.

CASE 1.—Appendicitis. On 25th at 10:30, p. m.; temperature 103.8; pulse 114; respiration 40. R., pyrogen 30-x, six doses. 12, midnight, same date: temperature 102.5; pulse 114; respiration 30. Pains easier, patient dozing. 26th, 2, a. m.; temperature 101.6; pulse, 120; respiration, 32. At 1, a. m., same date, purulent evacuation. At 10, p. m., same date, temperature was 102; pulse, 128; respiration, 34. R., pyrogen, cm. On 27th, 4 p. m.: temperature 99.4; pulse 96; respiration 26. Normal evacuation one week from 25th. Improvement continued until five days later when relapse from diet disturbance called for pulsatilla.

CASE 2.—Threatened abscess in frontal sinus. 24th, 2 p. m.: temperature 104; pulse 100. R., pyrogen cm. 6 p. m., same date: temperature 103; pulse 104. Pains improved. 25th, noon: temperature 103.8; pulse 120. Other remedies completed cure.

CASE 3.—Pneumonia. 4th, 5, p. m.: temperature 103.3; pulse 100; respiration 32. R., pyrogen, cmm. (S). Fifth morning, temperature was 100; pulse 80; respiration 24.

CASE 4.—Tonsilitis and inflammation of frontal sinus. 24th, noon: temperature 100.4; pulse 76. R., pyrogen cm. 25th, noon: temperature 98.5; pulse 60; 28th, noon: temperature 100; pulse 80. R., mercurius sol., 6m. 29th, noon: temperature 98.5; pulse 60. Boy has been a weak child from birth.

CASE 5.—Woman, aet. 21 years. 10 a. m.: temperature 105; pulse 126; respiration 44. Sudden illness with unconsciousness. R., pyrogen cm. 11 a. m., temperature 104. Next morning: temperature 99.4; pulse 80; respiration 28. In four days discharged cured.

CASE 6.—Typhoid relapse. Temperature 102; pulse 140. R., pyrogen cm. Temperature and pulse, both normal in twenty-four hours.

CASE 7.—Ptomaine poison. At 9 p. m.: temperature 104; pulse 104, soft. R., pyrogen cm. Next morning "no fever" and patient reported up.

CASE 8.—Typhoid relapse. 15th: temperature 104.3; pulse 120; R., pyrogen cmm., several times during week. Tumultuous heart and delerium. On 31st temperature was 98.5; pulse 76. Discharged cured.

CASE 9.—Pelvic exudation and septic endocarditis. Temperature 103; pulse 110. R., pyrogen 10D. Sudden drop to normal pulse rate.

Rapid diminution of pelvic exudates in three weeks, from size of child's head to size of apple.

CASE 10.—Sewer gas poison. Temperature 104.5; pulse 120. R., pyrogen cm., rapid cure.

CASE 11.—Mastitis. 5:30 p. m.: temperature 101.6; pulse 88. R., pyrogen cm. 9 a. m., following morning: temperature 98.5; pulse 88.

CASE 12.—Puerperal fever. 18th, 10 a. m.: temperature 100.6; pulse 120, difficult to count. R., pyrogen cm. 12:30, same day: temperature 101.4; pulse 130, stronger and steady. At midnight, same date: temperature 99.2; pulse 96. Other symptoms. Manifest improvement. 19th, 10 a. m.: temperature 101.8; pulse 128. Other remedies followed.

CASE 13.—Puerperal pneumonia. 2d, 4 p. m.: temperature 102; pulse 140; respiration 100. R., pyrogen cm. 9 p. m., same date: temperature 101; pulse 144; respiration 96. 3d, a. m.: temperature 99.3; pulse 132; respiration 72. Same date, p. m.: temperature 99; pulse 124; respiration 54. 4th, a. m.: temperature 98.2; pulse 116; respiration 24. Resting easily.

CASE 14.—Typhoid relapse. 19th, temperature 104; pulse 88. R., pyrogen cm. 21st: temperature 103; pulse 84. Other symptoms; improvement. 26th: temperature 101; pulse 72. 31st: temperature 98.5; pulse 76.

CASE 15.—Puerperal fever. Temperature 103; pulse 140. Cured in twelve hours with pyrogen cm.

CASE 16.—Puerperal fever. Temperature 106.5; unconscious. Rapid recovery.

CASE 17.—Puerperal fever. Temperature 106; pulse 130. Next day temperature was 102 and two or three days later, normal.

CASE 18.—Paralysis. Temperature 98.5; pulse 120. Pyrogen cmm. cured quickly.

CASE 19.—Grippe. Temperature 101; pulse 124. Recovery in twenty-four hours.

CASE 20.—Sewer gas poison. Temperature 99; pulse 146, later 160. R., pyrogen and rapid cure.

CASE 21.—Typhoid relapse. Temperature 102; pulse 140. Cured in 24 hours.

CASE 22.—Surgical pyemia from traumatic injury. Intense suffering for several days; exhaustion. 11 a. m.: R., pyrogen 50m. 4 p. m.: quiet. 9 p. m.: sleeping calmly; temperature reduced.

CASE 23.—Mastoid abscess. Oct. 18.—After two surgical operations on mastoid pulmonary abscess and pyemia. Dec. 6, temperature 101.3—102.3; pulse 100—120. Emaciation intense, apathy. Then treated with ice-packs; lachesis 6 and pyrogen 10. Two weeks later "No fever for two weeks." Pulse 80, with all wounds healthy and recovery of usual strength and form.

CASE 24.—13th, Ovarian abscess, for which medical attendant admitted inability to give benefit. R., pyrogen cm. 22nd, rigors much lessened; uterine discharge of thick, creamy pus. One month later, after general improvement under pyrogen, other symptoms led to the use of other remedies, which in the course of a year, restored patient to good health.

The guiding indications and the diagnostic symptoms have been omitted in these reports which are thus far offered to indicate the nature of the influence of the remedy and especially its action on pulse and temperature.

Case 1 and 2 present a high temperature and low pulse rate, both of which are reduced to produce the ratio of simple fever, when they both decrease to normal.

Cases 3, 4 and 5 have high temperature and low pulse rate, both of which are reduced to produce the ratio of simple fever and then decline to normal.

In cases 6, 7, 8 and 9 the low temperature and high pulse rate are both rapidly reduced to normal.

Case 10 has high temperature and low pulse (the opposite of the preceding) both rapidly reduced to normal.

Case 11 has the high temperature reduced and low pulse rate increased before both are reduced to normal.

Cases 12, 13 and 14 have the low temperature and high pulse rate relation continued for some time, while the influence of the remedy is manifest in the general improvement of the patient and the change in other symptoms.

Thus it is evident that no single form of change can be required as a measure of curative action except the very definite, the general expression that the patient's condition *approaches* normal health.

The results in these cases may be accepted as representative of the action of this remedy, when indicated. Even this brief outline is clear evidence that the results were exceedingly satisfactory.

HOMEOPATHY VS. LOCAL AND SURGICAL TREATMENT.

We must not fail to emphasize that practical application of this, as of all our remedies, depends, for satisfactory results, upon the dynamic conception of disorder and cure which Hahne-

mann presents. Pyrogen is not to be "tried" for a disorder diagnosed to be present in the patient; not for sepsis, grippe, abscess, puerperal fever, nor any other. Its provings are to be studied that its image may be recognized in individuals. These individuals are to be recognized as suffering a dynamic disturbance, expressed in the symptoms manifest in them, even to the extent of suppurative degeneration if the disorder be carried to ultimates.

Those who are able to perceive, in such patients, only a victim menaced by colony or colonies of bacteria and their products and hence attempt to cure by resort to the quickest method of devastating the tissues of bacteria or evacuating the puss that collects, will miss the opportunity of rendering the high service of restoring order in the sick, and fail to observe some of the most wonderful transformations that can be inaugurated by the carefully selected homeopathic remedy.

Case 22 in the foregoing list is a clear and forcible comparison of the results of the two methods of treatment. After this child had suffered months of distress with mastoid abscess and more than one surgical evacuation of pus, the overburdened system developed abscesses in the lungs and the surgeons declared their helplessness in the presence of diffuse pyemia. After all this siege the marvelous action of the homeopathic remedy restored order and transformed the child from the deathly aspect of pyemia to the plump and rosy appearance of health, within a few days.

With this, and other remedies belonging to a similar sphere at our command, we have no need to follow the professional mob crying "operate, operate," when the presence of pus is discovered or suspected in the tissues. The suitable remedies prove faithful allies in these terribly sick, poisoned ones as surely as those of other type do in the simple inflammations. Those who adopt the doctrines of homeopathy as a basis for the application of remedies are constantly demonstrating this truth.

LITERATURE.

The symptomatology of pyrogen and reports of its use are available in Clarke's Dictionary of Materis Medica, Kent's Lecture on Materis Medica, Transactions of International Hahne-

mannian Association for '86, '90, '91, '92, '93, '94, '95, '96, '97, '98, 1900, '01, '02 and '05 and occasional contributions in various magazines devoted to homeopathy.

Harrisburg, Pennsylvania.

A NEW MINERAL SALT—CHLOROIODIDE OF CALCIUM AND SODIUM.*

Julio F. Convers, M.D.

WISHING to please many of my colleagues, who use frequently the mineral salts of our organs as remedies and are anxious to know the progress in the method of the learned and ingenuous Dr. Schussler, of grateful memory, I resolved to prepare a double chloroiodide of calcium and sodium, which up to today, had not been used by any physician or pharmacist.

It was wanted in the therapeutic camp an antiseptic substance, which was not poisonous as the bichloride of mercury nor of a disagreeable odor as the carbolic acid and the iodoform, and not costly as many other modern chemical preparations.

The salt which I have prepared is without any of these disadvantages and its action as antiseptic is, if not superior, at least equal to the chlorides of lime and sodium so well known, from time immemorial, as powerful antiseptics and bactericides. I do not believe that the modern therapeutics is reduced to kill microbes, because all maladies are not infectious and even in these cases one must choose the remedies suitable to the objective and subjective symptoms; but I believe that, in the hygienic and prophylactic treatment, must be of principal importance the aseptic and antiseptic, especially when treating surgical affections.

This chloroiodide is a white salt, of astringent and salt savor, of faint odor like chlorous, of alkaline reaction, slightly caustic. It is soluble in water and deliquescent, less soluble in alcohol; saponifies the fats, crystallizes into white sheets, pearly and brilliant.

It is not written of in any of the works of pharmacy or of chemistry that I know: but, as the properties of the chlorides and

*American Institute of Homeopathy, Detroit, Mich., 1909.

iodides are known, by induction, the double salt can be applied in many protracted chronic affections.

It is known that the chlorides of our organism facilitate the phenomenon of osmosis in the tissues and that they form electrolytes with the electric currents originated by the chemical combinations realized in the cellules and the liquid intercellulaires; we know that the carbonate of lime, which we take with our food, is transformed into chloride in the presence of the hydrochloric acid of the gastric juice and, soon afterwards, when it assimilates, is converted into phosphate of lime under the influence of the biphosphates that circulate in the blood, for which we have used this chloride with success in rickets and in serofulous and tubercular affections.

The chlorides mentioned accelerate the digestion by transforming the insolubles, mineral substances, into soluble salts and by regularizing the functions of the muriatic acid; from here comes the general use of common salt with the meals. The earth, where natrum muriaticum is abundant, is more fertile than that where it does not exist and in these it is necessary to apply the common salt to the domestic animals.

The iodine and the iodides have similar therapeutic properties in themselves, they are anti-rheumatic, anti-serofulous, and anti-tuberculous.

Dr. Rabuteau, in his "Therapeutique," says that the iodide of lime produces very good effects in tuberculosis, because it is changed into phosphate of lime and iodine; that it increases the appetite and diminishes the sweats. Dr. Suffert says in his "Formulaire" that the calcarea iodata is quicker and more intense in its action than the calcaria phosphorica.

The same author indicates the natrum iod.³ for the coryea of laryngitis and pharyngitis chronics.

As it is seen, I have made only a slight sketch of the very important therapeutic properties of the chloroiodide and its components; but it promises to be very useful in the clinical camp, because it is composed of two chlorides and two iodides which have a notable influence in the physiological and pathological functions of our organism.

Bogota, Columbia, South America, April, 1909.

SPECIAL ARTICLE

THE LEAN WOLVES.

By R. del Mas, Ph.D., M.D.

THE READERS OF THIS ARTICLE will, please, pay no attention to the shell of the nut I am going to crack for them, but satisfy themselves with the meat of it; more plainly, I beg not to be led to apologize for giving this article such a sylvan name. I will explain: *Wolves* stand for ravenous eaters; *lean* for emaciated; and you and I for homeopathy.

Iodum was found by Courtois in 1811, and studied by Gay-Lussac in 1813 and 1814. It remained for the experimental therapist to give us the soul of such an individual. His hair and eyes are wont to be dark. His face looks old, aged, somewhat excited, pinched and sickly. You may often see scabs on his nose. When he was a child, he had membranous croup, the "saw-going-through-a-board" variety. He does not suffer from that any more; yet his large, indurated glands have not left him; and they will not either. He is sickly, dry, and debilitated, and still refuses heat of any kind, for he carries a fire with him. He will not listen to "warm wraps," only to a good meal, and often. He is weak, loses his breath on going up stairs, still he wants no heat. He is a queer lad. He tells us that *if he does not eat as soon as he is hungry, his chest aches*. This is due to a certain germ, the shape of which is still unknown. I could describe it to you, if you would listen to me. But

Iodum has a ravenous hunger which eating relieves, but it soon returns; although he lives well, he continues to dwindle away, and his glands to enlarge. But, while he eats he feels like a prince, exceedingly well. His body and mind anxiety, his murder impulses, his different troubles, everything is relieved, if he only can eat; and he feels like eating all the time. Scientifically speaking, he has lost the habit or capability of assimilating his food. His thirst is extreme also, more so during perspiration; and he perspires so easily. *Iodum* is found in all walks of life;

in the cradle, in the malarial districts, on the tottering staff; and in our sisters as well as in ourselves. They very frequently develop goitre. This patient grows very anxious, if he does not eat (*sepia*, while eating: *phosphorus*, after eating).

Natrum Mur. Is known also as a ravenous eater and a very thirsty member of the family. His digestive tract is suffering from drought. He also loses flesh while living well. He is not handy at eating bread, drinking coffee, partaking of fats and rich food, or meat. He can eat salt in place of candy. He is very fond of fish, oysters, sour things and cold drinks: but his food must be warm. In fever he is nauseated. At times he has violent attacks of hiccough, if he ever takes crude quinine. Sometimes, after swallowing his food part of the way, he violently ejects it. (*Phosphorus*). His tongue is mapped with red insular patches, and when it is not numb, it feels there is a hair lying on it; it shines like a glass bottle. After eating, he belches up wind and his mouth has a sour taste. His face looks aged; it is wrinkled, sallow, sickly, haggard, *oily*, often bloated. About his lips and mouth herpes crop out; vesicles form even on his chin, about his lips and mouth and on the wings of his nose. He is weak, anaemic, may be malarial, inclined to weep, scold and censure. He is very irritable and irresolute, craves sympathy, which when given, makes him (or her) mad. He is sad; trifles get him violently angry; and anger gives him a headache. His headache (classical) follows the sun and seeks cool air and cold applications, and comes periodically every day at 10 a. m. If he happens to perspire during the headache, he is ameliorated. Sexually he is indifferent. In the night, he searches the house, because robbers, he dreamed, walked in. Whenever somebody is present he cannot void urine. His fingers are decorated with hangnails. His lumbar spine aches, and whenever he can lie on something hard and flat on his back, he is relieved. His stool is crumbling; after passing it, his anus bleeds and smarts. If *Iodium* feels all of his arteries pulsate, *Natrum Mur.* complains his heart beats so hard that it shakes his body. Both are warm blooded, perspire easily, and catch cold very readily. I forgot to say the headache of *Natrum Mur.* begins with blindness, or is blinding in character. *Iodium* is as restless or impatient as

Arsenicum. Natrum mur. is quite indolent. The sadness of Natrum mur. has its equal in degree in the restlessness of Iodum; as to the induration of glands, only Iodum has it. The stool of Iodum is never dry and crumbling. Natrum mur. is subject to nightly emissions; Iodum, hardly ever. After eating, Natrum mur. is aggravated, and Iodum ameliorated. The Homeopathic stool needs often more than three legs to be able to stand up.

Abrotanum is cruel, violent, inhuman (anac., kal-iod); as cross and irritable as the two patients above sketched. Sympathy is unknown to him (nitric acid). He is lame, weak, unable to stand. If a child, he cannot hold his head up. He is anxious, trembling, worse if disturbed. Sleepy all day, After a diarrhoea is checked, he develops rheumatism. He has alternation of complaints; diarrhoea with rheumatism; constipation with diarrhoea; pains in limbs with stomach gout (ant. c., kal. bi., sang.). His stools are lienteric. His *emaciation runs from below upwards* (reverse of lyc. and nat. m.). Only later will his face be looking old, and wrinkled. He has a cold feeling in his stomach (caps.). His abdomen is distended. Although he lives well, he continually loses flesh.

China will often, in malarial districts, especially after loss of vital fluids (milk, blood, semen), have a canine hunger with indigestion, anaemia, rapid and general emaciation, undigested stools and copious night-sweats. His diarrhoea is biliary and painless. He shrinks from the least draught (kali. carb.) feels tired all over, restless. He is pale, oversensitive to pain; and, if pressure relieves him, he cannot bear to be touched (lach.). Clothing disturbs him. His troubles are intensified at night. Such a condition of affairs is often met with in children born of malarial parents. A close comparison is wanted here with natrum muriaticum, bearing in mind they are both very malarial, and the latter is warm-blooded. Quite characteristic of china is voracious appetite leaving at the sight of food, and returning only while eating, (eating increases appetite of lycopodium).

Sulphur, at the sight of food, loses his appetite also, grows dissatisfied, angry, flushes in the face, and leaves the table. About an hour before dinner he feels faint with hot flushes. His face is dirty-red. He walks stooped. His thirst is great. At

night his feet must be taken from under the covers. His skin is eruptive, itchy, filthy, fetid. His discharges are acrid. The world goes wrong with him; and he has been surnamed the *ragged philosopher*. Eating does him no good; he emaciates in spite of it.

Psorinum, like *china*, cannot often sleep, or wakes from sleep rather on account of hunger. He gets up through the night and eats. The skin symptoms of *psorinum* are like those of *sulphur*; but the former is as chilly as *hepar* and *silica*, and wants to wear a fur cap, coat or shawl, even in summer. *Sulphur* never does that, although he requires a medium temperature (*natrum carb.*), is quite sensitive to hot air (venous circulation) and damp cold (skin surface); and again, he was never known to be so ravenously hungry as not to be able to sleep through the night without eating. All the discharges of *psorinum* have a carrion-like odor. He has a "hunger headache" that eating relieves. Like *sulphur*, he has a *dry*, unhealthy skin that slight exertion covers with a fetid and abundant perspiration, which once checked, is a source of many a cold. *Psorinum* has a cough returning every winter, and is complementary to *sulphur*; so is *tuberculinum*, another emaciating fellow.

Petroleum is also very hungry, chilly, suppurative, sensitive and emaciated. If his bowels are loose, his hunger is increased (*iod.*, *sulph.*), and he eats, although the food aggravates him. He has eruptions that disappear in the summer and return in the winter (*psor.*); in well-known streets he loses his way; and he will often wake up bewildered, thinking, from dreams, of being double in bed. His diarrhoea leaves him at night whether he lies down or not. All night his palms and soles burn (*sulph.*). About the heart he has a sensation of coldness (*nat. m.*). Whenever he rides (boat, vehicles) he is dizzy, seasick. He is cold in spots, scratches himself until becomes raw and cold; he itches in his openings. He also burns in spots, and is very chilly; he is quite irritable and quarrelsome; trifles vex him; thunder storms aggravate him (*psor.*). If his eruptions are suppressed, diarrhoea follows. His appetite is really insatiable, and relieved by eating. (Reverse of *cina*, *psor.*, *phos.*).

Phosphorus has a "hunger headache" relieved by eating,

and a "goneness" of the stomach which seems to increase after eating. *Psorinum* is similar to him here. At 11:00 a. m. he feels empty (sulph.). He wakes up hungry in the night and must eat (china, psor.). Eating relieves him of all his sufferings (iod.). In the dark, he sees old faces coming out of the corners of the room. He dreads solitude. Cold he cannot bear, except about his head and in his stomach. Food and drinks must be cold to please him. He is weak mentally and bodily, craves rubbing which delights him and relieves his aches. Between the shoulders he burns (sulph.). His spine burns in spots. His fears slap him in his epigastrium (sulph.). He canot lie on the left side. Palpitations are violent and easily caused. His stool is dry and slender like a dog's. In his abdomen seems to center all his weakness, which a stool aggravates. He cannot assimilate his food better than the preceding patients already mentioned.

Calcarea also has a "stomach apprehension." He is weak; walking produces great fatigue, coition also. On ascending a height or going upstairs, his palpitations are violent, he pants, his knees give way, he must sit down to take a rest and a breath. muscles and veins are relaxed. He has no endurance. On the least exertion he is bathed in a running perspiration. His glands and ulcers indurate. His head is hot and feet cold. He is cold in spots, but sweaty. He is chilly, pale, with emaciated limbs and large belly. His weakness centers in his brain, limbs and chest. He is hopeless as to his condition. Clothing disturbs his stomach (china). Hangnails decorate his fingers also and he is very indolent, resembling in all this *nat-mur*, and *sulphur*. He sometimes thinks somebody walks or something runs beside him, and fears of becoming crazy, and that people will observe his condition and think that he has turned crazy. the longing for hard boiled eggs is there. He often talks to himself, and is afraid of consumption.

I beg leave to quit the *wolves* and return to society, in which I will endeavor to study the "Prosopalgia," first, and next the "Sciatica" victims, which, with your kind permission I will introduce to you later.

Centerville, Minn.

S E L E C T E D

THYROIDIN FOR NOCTURNAL ENURESIS.

THE *Lancet* in May contained a record by Dr. Williams of a most instructive series of cases of nocturnal enuresis. In one very troublesome case of this complaint the doctor was led to give *Thyroid* extract with great, indeed complete, success. Encouraged by this result, he tried the remedy upon other cases and achieved more successes, although failing signally in one instance. Noticing that concomitantly with the cessation of the trouble the general health frequently improved, he gave *Thyroid* extract to a patient who had never suffered from nocturnal enuresis, but was otherwise in poor health. To his astonishment, the drug which had formerly cured enuresis now caused it in a most marked and aggravated form. From this excellent demonstration of the law of similars Dr. Williams deduces very sound conclusions with regard to the necessity of beginning with a small dosage, and maintains his opinion that had he given a less quantity the one failure of his series might well have been another success. We congratulate him on his cases and his conclusions. The particular symptom of enuresis is not in our pathogenesis of *Thyroidin*, but may now be added, and Dr. Williams has sufficiently demonstrated its homeopathicity to that condition. A letter was addressed to the *Lancet* mentioning that this ability of a drug to cure a condition it could also cause, is a more generally possessed property than is recognized, but although the word Homeopathy was not mentioned the letter was not inserted.
—*The Homeopathic World.*

DR. DALE M. KING, editor of *Medical Counselor* has this to say of "Physician" who predicted the "Passing of Homeopathy" in a recent issue of *Illinois Journal of Medicine*:

"The man who wrote this letter and hid his name has either one of which he is ashamed, or carries a thorn gathered while ramming around out of his pasture in the dark. Anyway he isn't worthy much consideration. It is not necessary for us to reply to these five assertions and queries, but it is necessary that your attention be called to the present attitude of some of our old school friends that you be not deceived. The practice of homeopathy has brought us success, and in that very success now rests the danger that, as Physician writes, "Homeopathy will wake up and find itself dead." If you have been inactive the past few years in the interests of homeopathy get busy now and do the part you have neglected. Attend your state meeting, and, above all, the Institute meeting to be held here in June. You will find the time well spent, and will return to the field a more enthusiastic and active man. There are many matters of importance to be brought up, and you will feel better in having taken part in their adjustment."

THE VALUE OF BUTTERMILK.

EVER SINCE THE VOICE FROM EUROPE proclaimed that buttermilk and the use of lactic acid ferments would prolong life, render the arteries of the old more pliable, make the intestinal canal less putrefactive and in short make the old young or rather prevent the young from becoming old, there has been a keen demand for this by product that at one time was looked upon as only a fit food for swine.

Many notable characters have given up their favorite brand of whiskey and bitters for this more mild if less enthusiastic drink, the last of which is that well known figure "Buffalo Bill."

In no sense is the craze a reckless fad: on the contrary it seems to be a move in the right direction and he who partakes of this harmless, invigorating, strengthening fluid has much advantage over his neighbor who indulges in highballs, cocktails, or whisky straight his nutrition is better, his head clearer, his resistance better and his mind more serene.

But to a discussion of the subject: is laetic acid as found in sour milk a cure for all the ills that it is claimed to remedy? Is it not overrated and is its use not likely to be disappointing

in many cases and hence bring into disrepute a really good remedy.

It has a good effect upon the intestinal canal for a time but if long continued it is not well borne by many individuals, nor will it take the place of rest for the weary: neither will it relax the pressure induced by long, unremitting hours of mental over-work, it is not a cure for brain fag. Is it reasonable to suppose that the use of sour milk will soften the atheromatous arteries of the aged or loosen the stiff joints of the rheumatic, causing each to forget his infirmities and pains? No. By no means.

Yet it is a good drink, a good article of diet and wonderfully filling, though the individual can repeat this "filling process" almost indefinitely and one of the chief advantages it bestows is putting plenty of nourishing fluid into the system: in addition, some measure of good is to be gained from the acid and the further fact that he who drinks much sour milk and uses a goodly quantity of milk products eats less meat and sugar, they do not care for it, do not need it.

Better still is the sour or fermented milk that contains the fat and all other ingredients: it has all the advantages of the old time product of the farm and all the nutrition of the fresh, unsoured product: it is palatable and nutritious, is of some value in preventing auto-intoxication and gives tone to the entire system. It is a drink and also a food of much value in typhoid fever and in lesions of the stomach is often palatable when sweet milk is rejected with disgust.

Its use is not productive of harm and many times results favorable and agreeable follow its use. The artificial or "whole milk" product may be prepared by the use of "ferments" designed for the purpose and in the point of nutrition and taste is much more desirable. Give it a trial and permit your fever patients to do likewise.—*The Clinical Reporter.*

THE REVENGE OF HOMEOPATHY.—The Gazette has received a translation from the Bruxelles Illustré of Juilet 21, 1907, of an article that will be of interest to its readers.

Our physicians have usually only a disdainful shrug of the shoulders when one dares to speak to them of homeopathy.

Homeopathy, which sees itself so often vilified, even denied by allopathy. The official doctrine of the faculty has been covered with eulogy by one of the most distinguished members of the Academy of Medicine, by one of the most learned physicians of the Paris hospitals, Dr. Huchard. This excellent practitioner terminated his series of six conferences, to which from all parts of Paris crowded the doctors, anxious always to be instructed.

Before an enormous audience Dr. Huchard covered with flowers the homeopathic doctrine, saying impressively :

Gentlemen :—We give too much medicine! And by it we are often injurious (nuisibles) to our patients. The same medicine has entirely contrary effects, according to the strength or weakness of the dose. Thus, a large dose of strychnine administered to a dog paralyzes him. Whereas, a moderate dose augments the contraction of the muscles (*et le tetanise*).

You heard me recommend one to give in certain of our cardiac cases one or two drops in water, per day, of the 1000th solution of digitalis (*au millième*), and I saw you were astonished at the administration of such infinitesimal doses. It is important for you to know that the organism profits and derives much advantage from this—our cells are more sensitive than we can imagine to small doses of medicaments, and they are more easily impregnated by them. Thus, trinitrine works marvelously in doses of one drop of an alcoholic solution 1-100 in water. The more I advance in the practice of medicine the less medicine I give.

Look at my friend, Albert Robin, who administers to his patients a 500th milligram of gold or silver (*ferment metallique*), and obtains great results.

And our grand Pasteur—what has he done in injecting imponderable doses of his virus, of his toxins against the ravages of diphtheria according to homeopathy. And the illustrious Troussseau, and so many others. What have they so often practiced, if it is not homeopathy ?

But the very word seems to make one afraid, and is not pronounced. Very well—I—then pronounce it and I render it hom-

age. Let us have the courage of our opinions. Do not be sectarian. Let us take the good wherever we find it.

This lecture, which was a review of his six admirable conferences, has recalled the thesis of Van Zype in his beautiful comedy of *Les Etapes*: "Those who despise the pest must sooner or later render it justice."—*New England Medical Gazette*.

HOMEOPATHIC ENTHUSIASM IN ENGLAND.—Dr. Margaret Tyler, an enthusiastic English homeopath, has started a fund, the income of which will be devoted to sending young medical graduates to the various homeopathic schools in America for instruction in the law of similia. As is well known, there are no homeopathic medical schools in England and the supply of young men to fill the positions made vacant by old age and death is limited. Dr. Tyler has already contributed \$15,000 toward the fund, which promises to rapidly become large.

We extend to our English confreres our best wishes for their success and promise to exert ourselves to the utmost to live up to the expectations that they have of American homeopathy.—*New England Medical Gazette*.

HOMEOPATHIC REMEDIES FOR CHOLELITHIASIS.—Among drugs calc. carb. stands first, and Hughes claims that he has never had it fail him. The patient is inclined to obesity, perspires easily, there are stitches and pressure in the hepatic region, also a feeling of fulness and great dislike to clothing about the waist.

Belladonna is called for by the hot and fiery throbbing carotids, sensitiveness to light and noise or jar, and pains that come on quickly and leave as quickly.

Nux vomica is highly recommended by Hempel and Arndt in this affliction on these indications:

Hepatic colic characterized by the sudden invasion of the most excruciating pain in the epigastric region and right hypochondrium, nausea and vomiting, spasmodic contraction of the abdominal muscles, coldness of the extremities, profuse cold per-

spiration. The pain is more severe than that calling for belladonna. It may be necessary to give the nux in large doses in five drops of the tincture.

Berberis will sometimes give relief, particularly if the pains extend down the track of the right ureter. Dr. Arschagouni, of New York, speaks highly in its favor.

In the homeopathic school remedies are given rather for the digestive and hepatic disorders that are known to underlie biliary lithiasis than with a view to dissolving the stones. The leading remedies are cinchona, nux vomica, calcarea carbonica, chelidonium, lycopodium, sulphur, etc., prescribed on the general indications.—Dr. Ella M. Tuttle, February *N. A. Journal Homeopathy*.

THE PASSING OF THE DRUG.—In an editorial on this subject in the May Number of the *Ladies' Home Journal*, after commenting upon the fact that the use of drugs in the treatment of disease is fast becoming obsolete, the writer speaks of a drug bill contracted in a recent case of typhoid fever of \$200.00, and adds that “bills of an even larger amount were common in the past of cases of pneumonia.”

In a contemporary medical journal Dr. Lydston, I think it was, an eminent surgeon, asks where would we be without chloroform, ether, cocaine, carbolic acid, bichloride of mercury, iodoform, morphine, quinine, and other drugs about as useful? It seems as though when the editor of a literary journal intrenches upon the medical field he always makes an indecent exposure of himself, the more prominent the journal the less he seems to know upon the subject. Who ever heard of a bill of \$200.00 for drugs used in the treatment of typhoid fever, even in the old crude days. And such a drug bill in pneumonia, a disease lasting not half as long would be inconceivable.

Imagine, too, a homeopath subscribing to the “passing of the drug,” stepping aside from his *materia medica* to chase the various fads and isms and opathies that pass before his undisturbed vision day by day.—From “*Gleanings*” in the *Hahnemanian Monthly*.

THE HEART IN PULMONARY TUBERCULOSIS.

IN CONCLUDING AN ARTICLE on this topic in the *American Journal of the Medical Sciences* for February, 1909, Brown states that the treatment of the various forms of valvular heart disease, occurring in connection with pulmonary tuberculosis, differs in no way from that ordinarily employed in cardiac disease. Moderate elevations, not over 2,000 feet, are said by Anders to be the best for patients with valvular disease, but if well compensated they often do well at greater elevations. Patients should be fully warned against overexertion, for they have even less reserve force than the ordinary patients with only cardiac disease, and slight efforts may produce signs of noncompensation in both systems, rendering them much more susceptible to secondary infection.

The treatment of the rapid heart action and cardiac weakness in pulmonary tuberculosis differs but slightly from that ordinarily employed. Digitalis and strophanthus are of little avail. Arsenic, strychnine (in large doses), an ice-bag over the precordium, carbonic acid baths, rubs, absolute rest at first, and carefully regulated exercises related chiefly to those muscles which throw little or no stress upon the muscles of the thorax, are all of value. Nitroglycerin may give marked relief. Excitement of any sort should be avoided, and it is wise to refrain from alcohol and tobacco and to use coffee in moderation, if at all. Burton-Fanning has pointed out the value of restriction of food, and in some cases it is wise to omit milk for a time. Flatulency must be rigorously combated, and the diet should be rich in easily digested proteids. Palpitation of the heart should be treated by rest and the ice-bag, but bromides and valerian may be required.

—*The Therapeutic Gazette.*

CORRESPONDENCE

CHICAGO LETTER.

DR. G. G. SARKEY, Hahn. '10, is again a proud father. A daughter came to their home in May.

Dr. Frank A. Metcalf, Hahn. '97, recently changed his residence to 5300 Prairie Ave., Chicago.

Dr. J. G. Stone, Hahn. '08, has completed his service as interne in Hahnemann Hospital, Chicago.

Dr. B. T. Guild, Hahn. '08, is located in Ridgewood, N. J. The doctor is making a successful start.

Dr. Lillian M. Thompson, Hahn. '09, has opened an office at 4300 Ellis Ave., Chicago, in the Tudor Bldg.

Dr. J. G. Maxon, Hahn. '10, is summering at Attica, Ind., where he is an interne at the Mudavia Sanitarium.

Drs. J. K. Stewart and J. Robertson, Hahn. '10, are spending the summer employed as emergency physicians on the lake excursion steamers.

Dr. K. A. McLaren, of Ottawa, Ontario, a student in a Canadian Medical College, is attending clinics at Hahnemann Medical College and Hospital this summer.

The graduating exercises of Hering Medical College for the class of '09 took place the evening of June 4th at the Auditorium, many friends of the college and class being in attendance.

Dr. M. J. Hubeny, Hahn. '06, and wife have gone to Colorado for a short stay on account of the health of the doctor's wife. We hope to have them back again soon, both in good health.

Dr. Geo. E. Bartlett, Hahn. '08, recently finished his services as interne in Hahnemann Hospital, Rochester, N. Y., and

passed through Chicago on his way home, where he will rest before locating.

Hahnemann Medical College will open Sept. 27th, 1909. Anyone wishing catalogue or any information about the College can have same by applying to the Registrar, Dr. W. H. Wilson, 2811 Cottage Grove Ave., Chicago.

Dr. W. H. Wilson, Registrar of Hahnemann College, has information about some good locations for homeopathic physicians who are looking for places. Anyone interested can write direct to Dr. Wilson and he will be glad to answer inquiries.

The following appointments as internes have been made from the graduating class of '09 from Hahnemann Medical College. Most of them have begun their work and are well pleased. One-half of this year's class took hospital positions, as follows:

G. H. Grieves, M.D., Hahnemann Hospital, Philadelphia.
R. F. Miller, M.D., Chicago Homeopathic Hospital, Chicago.
A. T. Wismark, M.D., Grace Hospital, New Haven, Conn.
M. Meizener, M.D., Metropolitan Hospital, New York City.
Hugo C. H. Schroeder, M.D., Metropolitan Hospital, New York City.

H. Branyan, M.D., Hahnemann Hospital, Chicago.
Chester Moe, M.D., Hahnemann Hospital, Chicago.
S. E. Parr, M.D., Hahnemann Hospital, Chicago.
A. B. Sowers, M.D., Hahnemann Hospital, Chicago.
F. H. Lovell, M.D., Hahnemann Hospital, Chicago.
David Brewer, M.D., Chicago Union Hospital, Chicago.
Bertha Brewer, M.D., Chicago Union Hospital, Chicago.
J. B. Griffin, M.D., Flower Hospital, New York City.
I. H. Lockwood, M.D., Flower Hospital, New York City.

June 17, 1909.

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All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

THE CRITIQUE has always contended that news to be appreciated or to be of any value whatever to its readers should be of the very latest as well as the most authentic. For this reason I have held the forms several days over the regular time in order to give the more important features of the Detroit meeting. Dr. Julia C. Loos; our special representation on this occasion, has

taken great pains to provide our readers with some very interesting news and in so doing shows her loyalty and enthusiasm for the cause in language well calculated to inspire confidence and continued effort on the part of those to whom the success of this as well as all future meetings of the Institute may be attributed.

To begin with Dr. James W. Ward, of California, was elected President and while my informant does not give the next place of meeting, I have no doubt but what Los Angeles will be chosen by the executive committee. This of itself is sufficient cause for felicitation on our part, as it is always extremely pleasant to be on the "I-told-you-so" side of any proposition.

The list of officers-elect is as follows:

President—Dr. J. W. Ward, of California.

First Vice President—Dr. H. D. Schenk, New York.

Second Vice President—Dr. Sarah M. Hobson, Illinois.

Secretary—Dr. J. Richey Horner, Ohio. (Dr. Horner was elected for the short term which expires January, 1910, as well as for the long term expiring January, 1911).

Treasurer—Dr. T. Franklin Smith, New York.

Censor—Dr. J. B. Garrison, New York.

Registrar—W. O. Forbes, Arkansas.

Trustees under new incorporation—Three years, James H. McClelland, Eugene H. Porter, J. B. G. Custis. Two years, George Royal, Wm. Boericke, Dr. Hall. One year, John P. Sutherland, E. H. Mann, Dr. Phillips.

Dr. Loos says, regarding the Institute Journal: "During extended deliberations and complete discussions of the journal proposition, conducted in the most dignified and enthusiastic manner, the following amendments to the agreement were presented by the Journal Committee. Amendment to last section of agreement: 'In event of failure of party of the first part to comply with the contract or for any avoidable reason it fail to issue the journal for two consecutive months, it shall be the privilege of the party of the second part to take over the title, subscription list and advertising contracts of the *Journal of the American Institute of Homeopathy* and to publish it on its own account, or to contract with another publication.'

The outcome of the entire consideration was a unanimous and enthusiastic adoption of resolutions to effect that the conduct of affairs be left in the hands of the existing Journal Committee until the trustees-elect assume control of Institute affairs."

The attendance at this meeting was very large, 316 votes being cast in the election of officers.

Between the close of last session and the meeting just held in Detroit, over three hundred and fifty new members have been added to the Institute. Much of this increase is ascribed to the establishment of the *Journal*, so Dr. Loos declares.

The committee on medical education reported an immense amount of work done by systematic coming in touch with persons interested in the study of homeopathic medicine.

The work of the various bureaux manifested a lively interest in homeopathy, in the care of patients and a desire to emphasize it in all teaching and practice.

The entire session was marked by enthusiasm and general good will and as a result there has been a marked renewal of interest in Institute matters as well as activity among the profession in their loyalty to homeopathy.

Now that the Institute members have had ample opportunity to investigate the journal proposition, and other matters, and have decided to continue the publication as at present conducted, it behooves us all to do everything in our power to promote the interests of the Institute's mouthpiece. So far as THE CRITIQUE is concerned it has had its say and started quite a tidy little tilt. I have no further comment to make on the subject just at present, and am inclined to think, insofar as this publication is concerned, that the incident is closed.

There is just one objective at present and that is the meeting place in 1910, and the loyal support of Dr. James W. Ward in his effort to make the meeting at whatever place this may be, one of the most prosperous and largely attended of any within the history of the Institute.

M.



Miscellaneous Matter



Send Us a Personal Item Occasionally

June was a bad month for news in the medical world hereabouts.

* * *

Dr. F. C. Strong contemplates a sojourn in the Yellowstone Park during the summer.

* * *

Los Angeles now has a receiving hospital, which is located at First and Hill streets.

* * *

A bill in the Illinois legislature authorizing compulsory vaccination, has been defeated.

* * *

Dr. G. A. Huntoon is now editor and business manager of the *Iowa Homeopathic Journal*.

* * *

The Evangelical Lutheran Sanitarium is a Denver institution of which Dr. W. N. Beggs is medical director.

* * *

The Iowa Hahnemannian Association resolved in favor of the *Journal of the American Institute of Homeopathy*.

* * *

We regret to learn that Dr. H. H. Baker, according to *Medical Advance*, is suffering from organic heart disease.

* * *

Dr. Osmond Royal, of Portland, Oregon, has been appointed member of the Oregon State Board of Medical Examiners.

* * *

Dr. Francis B. Kellogg, of Los Angeles, is the newly-elected president of the California State Homeopathic Medical Society.

* * *

Dr. A. C. Cooperthwaite, of Chicago, has regained his health and resumed practice. His offices are in the Marshall Field building.

* * *

Dr. C. M. Moreford was elected president of the Hahnemann Medical Association of Iowa, at its recent meeting held in Waterloo.

* * *

"I love my wife, but oh you schoolma'ms," will be the song in Denver this month. The N. E. A. meets here then—if it don't rain.

* * *

The homeopaths of the state of Washington met at Seattle on April 7th, and organized. Dr. E. Weldon Young, of Seattle, was chosen president.

Dr. Melville Black attended the national meeting of the A. M. A., at Atlantic City, last month. He is secretary of the State society of this faith.

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Don't forget that the next meeting of the Southern Homeopathic Medical Association will be held in Hot Springs, Ark., November 15th, 16th and 17th.

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The man who manufactures the "dry climate" cigars in Denver will have to see the weather man or change the name of this particular product.

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If Progress continues to cut its size in the next year or so as industriously as it has in the past, there will be nothing left of it "but the shoe strings."

* * *

If it keeps on raining in Denver as it started out during the forepart of last month, Denverites will be dubbed "web-foots" by residents of "dry" territory.

* * *

The sixty-fifth annual meeting of the American Institute of Homeopathy is a thing of the past. Let's look over the proceedings and see what was accomplished.

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According to rumor, more or less reliable, the homeopaths are getting every sixth patient in the clinics of the Denver City and County hospital. That helps some.

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Dr. J. Wylie Anderson, business manager of **The Critique**, is expected home from his Alaska trip about the 6th of this month. Look out for b'ar meat about that time.

* * *

The Critique is pleased to say that Mrs. Dr. Orr, of Barnum, has quite fully recovered the effects of several operations performed at Park Avenue hospital the forepart of May.

* * *

We are pleased to announce another special article from the pen of Dr. del Mas, which will appear in August issue of **The Critique**, subject of which is "The Gonorrhoeal Rheumatics."

* * *

Out in Washington they tell of erecting a fourteen-room house from the lumber secured from a single yellow fir tree. Either a mighty big tree or an awful large lie, we don't know which.

* * *

The Denver correspondent of **Hahnemannian Monthly** hopes that a sufficient number of homeopathic physicians will conclude to locate in Denver, "until we are equal to the present dominant school."

The Hahnemannian Journal, for June, speaks up quite spiritedly regarding that American Institute Journal proposition. It is really remarkable how a little matter of this sort will jolt some people loose from their shell.

* * *

While pushing a lawn mower for the purpose of "shaming" her husband into mowing the grass, an Illinois woman dropped dead. This one accidental occurrence is quite likely to discourage this method for all time to come.

* * *

Colorado news in the Journal of the American Institute of Homeopathy is much given over to telling nice things about Progress. This pamphlet had a hard time getting out at all last month; not appearing until the 13th.

* * *

One Kansas editor declares that women of all ages are constantly "waiting" for some man. The young ones wait for him to propose while the married ones wait for him to come home. Seems to be a waiting game all 'round.

* * *

Among the marriage licenses issued last month the name of Miss Hallie Burg, daughter of Dr. W. F. Burg, was mentioned in connection with a promising young business man of Provo, Utah. The Critique congratulates the gentleman from Provo.

* * *

Battle & Co., 2001 Locust street, St. Louis, Mo., have just issued number 9 of their series of Dislocation charts and will be pleased to send the same free, to physicians, on request. They are well worth sending for The Critique is pleased to assure its readers.

* * *

The number of persons adopting the medical profession as a livelihood in London, England, is decreasing, if one is to judge from the report of accredited physicians plying their profession in that city during the past two years. In 1907 there were 6,480 against 6,420 last year.

* * *

The chap who advertised extensively a certain wireless system of healing and who held forth in fine quarters at the Savoy, was found guilty of practicing medicine without a license by a jury in the West Side court of Denver recently. But he took the case to the supreme court.

* * *

Dr. F. E. McCurtain, who has represented the Borden people in this territory and the Pacific coast for the past three years, has resigned his position and will hereafter devote his energies to attending to his quite large property interests in this city. His many friends will be pleased to learn of his prosperity.

The twenty-ninth annual announcement of the Denver and Gross College of Medicine, medical department of the University of Denver, session of 1909-10, has been received. Consulting the pamphlet one concludes that this concern is in a particularly comfortable frame of mind insofar as its patronage is concerned.

* * *

Dr. A. P. Hanchette, of Council Bluffs, Ia., now maintains an office in Omaha where he may be consulted. Any of our readers requiring the services of a first-class homeopath and who happen in Omaha at that time, should take particular pains to look up Dr. Hanchette. His offices are with Dr. F. F. Teal.

* * *

According to a bit of "Ancient History" published in May issue of the *Pacific Coast Journal of Homeopathy*, a resolution was passed by the San Francisco County Society of Homeopathic Physicians in 1873, inviting the American Institute of Homeopathy to hold its session for that year in San Francisco. Some time ago, eh?

* * *

Dr. C. M. Worth, the energetic secretary of the Colorado Homeopathic Society, has been having a heart-to-heart talk with each individual member of the society during the past month, in which he has urged increased attendance, payment of dues, presentation of papers and other important moves on part of the aforesaid members.

* * *

Dr. Thatcher, who occupied Dr. Anderson's office during a portion of the latter gentleman's sojourn in Alaska, returned to his home in Dallas, Texas, the middle of last month. Dr. Thatcher is a gentleman whom it is a pleasure to meet and we hope he will take no unpleasant recollections of Denver to his old home, but that he will come and see us again.

* * *

The editor acknowledges receipt of invitation to attend the ninth annual graduating exercises of the training school for nurses, of the Gowanda State Homeopathic Hospital, Friday, June 18th. Inasmuch as the bid came on the same date the event occurred and our flying machine was out of order we did not attend. Hope this explanation will be satisfactory.

* * *

At the annual meeting of the faculty of the Hahnemann Medical College of the Pacific, held at the Fairmount hotel, May 22d, seven students were recommended to the board of trustees for the degree of the college. The following faculty officers were elected for the ensuing year: Dean, James W. Ward, M. D.; registrar, E. R. Bryant, M. D.; secretary, C. B. Pinkham, M. D.

* * *

All the homeopathic physicians of Champaign, Illinois, with the exception of one, have been compelled to join the A. M. A. This par-

ticular one is having a hot time of it, inasmuch as no professional brother in that locality will consult with him. The doctor thus shunned is worthy of much praise and his name should head the list and be printed in bold letters: "DR. P. S. REPLOGLE."

* * *

The Critique regrets very much that owing to the illness of Mrs. L. P. Crutcher, of Kansas City, her husband was unable to attend the meeting at Detroit. This fact deprived the bureau of Materia Medica of its very efficient head. If we only knew at this writing where the next meeting was to be held, we would say "cheer up, Crutcher," we will meet you next year at _____.

* * *

Mr. John H. Burg, president of the Burg Wagon Company, Burlington, Iowa, is at present a guest of the Eleventh Avenue hotel, this city. He is here in the interest of his health and during his stay is under the professional care of Dr. W. F. Burg, who, by the way, is a brother. The Critique congratulates Mr. Burg upon his choice of physicians and has no doubt that he will benefit thereby in many ways.

* * *

Dr. George D. Stanton, Stonington, Conn., in a recent issue of Clinical Medicine, declares that "the iodide of silver in 1-8 to 1-6 grain doses triturated with pulverized sugar of milk administered three or four times in twenty-four hours will cure the most obstinate cases of pertussis, in from eight to ten days." In addition to the above he says: "I have used this remedy for over forty years without a single failure."

* * *

The newly appointed board of medical examiners of the state of Oregon is composed of five "regulars," two homeopaths and two from the osteopathic ranks. The official organization consists of a "regular" president and vice president, while an osteopath acts as secretary and a homeopath, Dr. G. H. Dow, of Chehalis, takes care of the coin. The two homeopaths on the board are Drs. E. W. Young, of Seattle, and G. H. Dow, of Chehalis.

* * *

It pays to get your sins washed away in the Wabash river. A man by the name of Morgan was baptized in that historic stream recently and during the dipping a mussel took hold of his shoestring and remained there until removed by the owner of the string. On being dislodged a pearl valued at \$500 was found inside the mussel. That is a rather muscular story.

* * *

Among the matriculates, 1908-9, of the Denver and Gross College of Medicine we notice the name of Mrs. Jessie B. Acres, who, for a while and in the hope of acquiring a knowledge of homeopathy, attended the college of P. and S. where you are supposed to secure a

scrambled variety of scientific knowledge. This student evidently concluded to get her "regular" larnin' at a regular institution devoted to that brand and none other. Correct.

* * *

Dr. Genevieve Tucker, of Davenport, Ia., formerly of Pueblo, Colo., in a recent issue of *I. J. of H.*, urged the women physicians of Iowa to assist in making good the pledge of Dr. Harriette Messenger given at the Kansas City meeting, that the women of Iowa would contribute one hundred dollars to the propagandistic movement. It appears that the other women have left Dr. Messenger to "hold the bag," all of which does not appeal to Dr. Tucker in the light of a fair deal. Chip in girls.

* * *

According to a circular letter received at this office some time the forepart of last month we are given to understand that The Organic Chemical Manufacturing Co., of Philadelphia, has instituted legal proceedings against the American Medical Association. We are not familiar with this fuss, but suppose it another example of the rule or ruin policy of the Almighty Simmons and others of his sort. Go to it, Organic, old boy, and may you get judgment for the full amount—\$200,000.

* * *

Denver's winter weather so far, has been a decided drawback to entertainment of the customary tourist. Notwithstanding this unpleasant feature a bunch of real live railroad conductors took possession of the town and afterwards the Moffat road the latter part of last month, and *The Critique* editor acknowledges a most pleasant visit from the aforesaid. Rock Island men were much in evidence and of course we were glad to see them individually and collectively.

* * *

It is to be regretted that owing to a connivance of the regents of the Minnesota University and the lack of back-bone of Governor Johnston of that state, the Homeopathic department of the aforesaid university has been abandoned, and that now but two didactic chairs are to the credit of homeopathy in that institution. To those who look upon the wiping out of **sectarianism** in our public institutions, this bit of information will, no doubt, be received with more or less pleasure.

* * *

The speed bug has gotten into the bonnets of several Denver doctors and, as a result, a number of the profession have been called to pay fines in police court during the past month. One M. D. was arrested six times in one week for fast driving, (horses) and several had their licenses (automobile) amputated for fast driving. There is some satisfaction in being poor; absolutely no danger of arrest from either cause. No one is ever arrested for fast foot work; it is healthier to walk, anyway.

Dr. H. C. Aldrich, Minneapolis, Minn., (who looks like me—Editor), accompanied by his wife, paid Denver a very brief visit the last Sunday in May. He had been vacationing on the Pacific coast and contemplated visiting a son in Bryanville before returning to his home in Minne-sote. The only complaint we have to make regarding the doctor's stay in Colorado is that it was entirely too short, and we hope when he comes again that he will give his friends more of an opportunity to enjoy his smiling presence.

* * *

The program for the regular monthly meeting of the Regular Homeopathic Medical Society, of Chicago, consisted of a joint debate upon the topic: "That Moral Attitudes are More Potent in the Cure of Physical Disorders than are Medicines." Dr. Sheldon Leavitt supported the affirmative and Dr. James West Hingston opposed him. This debate followed the discussion upon a similar subject which occupied the attention of those present at the May meeting, during which a challenge was made and accepted for the above argument. This was the last meeting before the summer vacation and new officers for the ensuing term were elected.

* * *

"Dr." G. I. Dimm of Fostoria, Ohio, was found guilty of practicing medicine without a license, by a jury in probate court. The case was prosecuted by the state medical board. Dimm insisted upon conducting his own defense. Upon cross-examination he was asked to locate the "E Pluribus Unum nerve," which he proceeded to do with the utmost solemnity. As a further test of his medical knowledge, Dimm was then requested to locate and describe the "Sic Semper Tyrannis nerve," and he readily complied. After being out a few minutes, the jury returned a verdict of guilty with a recommendation of clemency. Sentence was deferred.—**Daily Paper.**

* * *

Payment of commissions by specialists to general practitioners who call them in for operations or advice was characterized as "graft pure and simple" by Dr. E. Gard Edwards of La Junta, Colo., today before the American Academy of Medicine meeting here in annual meeting. Dr. Edwards flayed medical men who, he claimed, are making a regular practice of dividing the high fees demanded by the specialists. Dr. Edwards also condemned the practice of many specialists who perform operations and then have their patients placed under the care of the local practitioner who "receives the blame if they die and none of the credit if they live."—**Daily Paper.**

* * *

The International Homeopathic Medical Directory, 1909, has been received at this office. It is a well printed product of the printer's art and contains a vast amount of valuable information. It gives the

names of many medical men in most every civilized country, their consulting hours, telegraphic address, telephone numbers and such other information of a practical nature as to make the publication almost indispensable for the consulting room table as well as for the traveling bag. In his preface the editor, J. Robertson Day, declares the document to be corrected up to a high state of perfection. We notice that among the American Homeopathic Journals listed in this work, that **The Critique** is one of the thirteen mentioned. It is published by the London Homeopathic Publishing Company, 12 Warwick Lane, E. C., and the price is 2s. 6d. net.

* * *

Speaking of the **Journal of the Institute of Homeopathy**, the **Iowa Homeopathic Journal** says, editorially: "Very few of the journals are voicing any protest against it and what few are, are not to be blamed for it, for possibly they would not be so happy and contented if they did not have something to kick about." It is altogether probable that someone besides the real editor of the aforesaid journal wrote that article. Whoever it was, however, he, she or it, failed to appreciate the fact that not a single journal had a good word to say for the journal, the journal committee, or the executive committee in their last issues. It's really bully to be a "kicker" when you have such company as **Hahnemannian Monthly**, **North American Journal of Homeopathy** and nearly all others of any standing whatever. Why even **Progress** mustered up sufficient spunk to speak out in meeting on this subject, and in no uncertain tones either.

* * *

Seldom it is that the medical world is startled by a theory as radical as that advanced by Dr. H. G. Nierman of Fort Mayne, Ind., who declares that the disease-breeding large bowel should be cut out and the ends short circuited. He says that this would practically render a man impervious to the dead typhoid germ.

Dr. Nierman has removed the section of the bowel in several patients that have come under his care for intestinal trouble, and says that in every instance the results have been satisfactory. The theory is not new, Metchnikoff advancing it a number of years ago. But Metchnikoff had never seen the operation performed and never attempted it.

Strange as all this is, it is stranger to know that Dr. Nierman himself has submitted to sinstra ileocoloectomy, the technical name by which the operation is known. A slight sufferer from intestinal disorders and knowing that they would grow acute as time went on he went upon the operating table at St. Joseph's hospital in this city on January 26th, last, and is now rapidly recovering from the effects of the operation and is a living proof of the practicability of his own theory, probably the most radical in surgical history.—**Daily Paper**.

READING NOTICES

Of Interest to Everybody

THE GASTRIC NEUROSES.—In all functional derangements of the nervous mechanism of the stomach, Gray's Glycerine Tonic Comp. will be found of extraordinary therapeutic value. Its action is manifold, manifested by an immediate influence on the gastric tissues and a substantial promotion of the general nutrition. As the secretory and motor functions are improved, the patient's whole condition is correspondingly benefited.

THE MEDICAL ERA'S GASTRO-INTESTINAL EDITIONS.— During July and August The Medical Era of St. Louis, Mo., will issue its annual series of issues devoted to gastro-intestinal diseases. The July number will take up the usual Bowel disorders of hot weather and the August will be devoted entirely to Typhoid fever. These issues always attract considerable attention. The editor will forward copies to physicians applying for same.

CHOREA.—The nervous system in every case of St. Vitus' dance shows a more or less marked depreciation of functional vitality. Valuable as nearly always will be found some preparation of arsenic—Fowler's solution usually—many practitioners have grown to place great reliance on the preliminary or coincidental use of Gray's Glycerine Tonic Comp. The tonic reconstructive effect of this eligible preparation is promptly manifested by a substantial improvement of all vital functions and a very pronounced augmentation of so-called nervous stability. The following prescription with suitable rest, diet and regulation of the hygiene, is without a peer:

R Liq. Potass Arsenitis	5iss
Gray's Glycerine Tonic Comp.	2viii
	(P. F. & Co.)

M. et Sig: A teaspoonful in water three times a day for a child eight years old.

TREATMENT OF INTESTINAL AFFECTIONS.—In the latest edition of his Practical Therapeutics, Professor Hare says that salol "renders the intestinal canal antiseptic, and so removes the cause of the disorder, instead of locking the putrid material in the bowel, as does opium." He regards salol as "one of the most valued drugs in the treatment of intestinal affections." When we add the antipyretic and anodyne effects of antikamnia, we have a happy blending of two valuable remedies, and these cannot be given in a better or more convenient form than is offered in "Antikamnia & Salol Tablets," each tablet containing $2\frac{1}{2}$ grains antikamnia and $2\frac{1}{2}$ grains salol. The average adult dose is two tablets. Therefore, we conclude that to remove the cause, i. e., to render the intestinal canal antiseptic, we have an invaluable remedy in salol; while to remove accompanying pain, to quiet the nervous system, and to reduce any fever which may be

present, we have a remedy equally efficacious in antikamnia; an ideal combination for the treatment of this large class of diseases.

THE SECOND SUMMER.—There is no denying that the second or "teething summer" is usually a hard one for the babies. Digestive disturbances are common and the "wear and tear" on a little one's nervous system is often severe. The systematic use of Gray's Glycerine Tonic Comp., however, in doses of twenty to thirty drops, three times a day will obviate many if not all of the distressing complications that make the second summer such a bugbear. The baby's digestion improves, its assimilation of nutriment is aided and its whole vitality is so materially elevated that the teething process becomes a negligible factor, at least so far as the general health is concerned.

The formula of Gray's Glycerine Tonic Comp. adapts it particularly to the needs of growing infants that show the slightest digestive or other weakness. Clinical experience is a dependable guide, and countless infants have been carried over critical periods by the judicious use of this effective remedy. At such times it has proven time and again a true therapeutic friend to zealous, painstaking practitioners.

ENTERO-COLITIS AND CHOLERA INFANTUM.—The following advice from the pen of a well known Denver physician, will be found to be most seasonable and helpful, in the treating of entero-colitis.

"Cleanse the intestinal tract with calomel and a saline or with castor oil. Prescribe a suitable diet, easily digested and non-irritating. Irrigate the rectum and colon at suitable intervals with normal salt solution or some mild antiseptic, using for the purpose a soft rubber catheter or colon tube.

"Instead of opiates, which lock up the secretions and thereby favor auto-intoxication, relieve the muscular rigidity and the excruciating pain which is such a drain upon the vital forces by the use of Antiphlogistine as hot as can be borne over the entire abdominal walls and covered with absorbent cotton. If the patient is not too far gone, the effect will be astonishing. The little drawn faced patient, who until now has been suffering severely, will in most cases soon quiet down; the agonized expression will leave the face and restful slumber supervene, thus starting the child upon the road to recovery."

FUNCTIONAL NEUROTIC DISORDERS.—The various vital functions of the organism are so intimately associated and correlated that it is impossible to definitely attribute any chronic nervous illness to disease or derangement of but one of the great bodily systems, i. e., circulatory, respiratory, digestive, lymphatic or nervous. The many neurotic conditions which the physician is so frequently called upon to treat cannot be successfully attacked by confining treatment to the nervous system exclusively, any more than can the cutaneous affections—acne, eczema or urticaria, be permanently relieved by lotions, washes and unguents alone. Neurasthenia, Nervous "Breakdown," Nervous Prostration, "Brain-fag" and allied states are usually but neu-

rotic manifestations of some constitutional metabolic fault, which must be sought out and remedied if intelligent therapy is to be applied. Among the various pathologic conditions which oppose the relief of neural disorders, Anemia, whether primary or secondary, is always worthy of therapeutic attention. Unless the blood supply is relatively normal in both quantity and integrity, its oxygen-carrying capacity is "below par" and, consequently, metabolic exchange and interchange is embarrassed and the necessary improvement in bodily nutrition is difficult of accomplishment. Pepto-Mangan (Gude) stimulates and encourages oxygenation and nutrition, by furnishing the more or less impoverished blood with an immediately appropriate form of its vital metallic elements, iron and manganese. The vital stimulus thus imparted is often the one thing needful to initiate the substantial systematic "building up" process which must precede the desired recovery from neurotic disorders.

ACCURACY IN THERAPEUTICS.—The efficiency of a medicinal agent cannot be determined by mere physical appearance. Two specimens of fluid extract of digitalis, for example, may look precisely alike. One, upon administration, may exhibit a wholly satisfactory therapeutic action; the other, given under precisely the same conditions, may prove to be practically inert. Lack of uniformity in the crude drug, and absence on the other hand of an adequate method of assay, account for the singular discrepancy. And this serves to show the necessity of standardized remedial agents if we would proceed in the treatment of disease with any assurance of success. It emphasizes, too, the futility of trusting to chance that the extract of a crude drug contains what the practitioner supposes it to contain and what it ought to contain.

It is a healthy sign that manufacturers of medicines—some of them at least—are giving serious thought to this matter of standardization. It is cause for gratulation that the largest producers of medicinal products in the world consider the subject of sufficient importance to make it the basis of an expensive promotion campaign. We have in mind a series of announcements which have been published from time to time in practically the entire medical press of the country, the latest appearing under the significant title, "Who is the Keeper of Your Reputation?" In their plea for greater accuracy in therapeutics Messrs. Parke, Davis & Co. are doing vastly more than to exploit the product of their manufacture—they are rendering a lasting service to medicine.

It is to the physician's own interest, and to the interests of his patients, to prescribe standardized preparations; to provide himself with the most trustworthy agents that the market offers. The best is none too good for his purpose.

Denver, Colorado, August 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

THE BEST MEDICINE.

By J. C. Holloway, M.D.

THE WRITER has been practicing medicine about twenty-seven years, but has never been fortunate enough to learn what is "the best medicine" for measles, whooping cough, typhoid fever, chills, diarrhoea, haemorrhoids or any given disease *per se*. However, assisted by some real homeopaths, he has learned that which is of vastly more importance, viz.: how to find in any given case of natural sickness *the best medicine for the patient*.

It is my purpose in this article to throw out a few hints to young physicians which, if they learn how to utilize them, will not only enable them to cure their patients, but forever shield them from the charge that they are "treating the wrong disease." The physician who practices pure homeopathy is always free from this charge, for he does not treat the disease at all, but the patient.

Let us suppose the patient has an afternoon temperature of 103 and a morning temperature of 102; that he constantly bores at the nose and picks at the lips; that the lips are dry and parched and bleeding; tongue coated white or brown, with papillae erect; throat sore, inflamed, and tonsils enlarged; that there is much thirst for small drinks; no appetite; some vomiting, especially the first two days; abdomen tympanitic and much complaint of cutting pains below the umbilicus; bowels evacuated daily; sometimes formed stool, sometimes diarrhoeaic, sometimes involuntary; urine very scanty, often no evacuation from the bladder for twenty-four hours. If he opens the mouth to protrude the tongue, the lips, tongue and buccal cavity are covered with blood. Bright red spots on cheeks and he bores into the nose with his fingers until they are covered with blood. Patient is six years old and frail. What shall we call it? Typhoid fever? Diphtheria? Worms? Well, just call it *arum triphyllum* and

save your patient. That is what the writer did in just such a case a few days since.

Suppose you know to a moral certainty that the correct diagnosis is typhoid fever; that could not help you in the selection of the curative medicine, for there is no best medicine for typhoid fever. The same is true of scarlet fever and every other so-called disease. *No disease is the same in all patients.* Hence choose the medicine which, in its proving upon healthy human subjects, corresponds to the individualizing symptoms of the patient.

Another case: Involuntary, soft stool while passing wind; a feeling of insecurity about the rectal muscles; fear lest a stool should escape with flatus; *heat and burning in the rectum*; piles relieved by bathing in cold water; *desire for stool after each meal*; the haemorrhoids protrude in bunches; a constant feeling as if he must go to stool. Now you may label the sickness with any *name* you think proper; but whatever the name may be, if these symptoms are present the *best medicine for the patient*, is *aloe*.

Again: Much straining *even with a soft stool*; or the stool consists of *little hard balls*; the rectum *seems paralyzed*; inability to pass water *except when at stool*; and even then *must strain at stool in order to urinate*. Profuse, yellow, corroding leucorrhœa; or abundant discharge of transparent mucus, so profuse as to require a napkin—it streams down her limbs to the knees; *she always awakens with palpitation of the heart*; *leucorrhœa only in the daytime*; menstrual discharge *too pale*, or simply *colored water*. The “best medicine” for the patient, is *alumina*.

Headache which is relieved by *binding something tightly about the head*; soreness in the throat with sensation *as if a splinter were lodged there*; stomach feels as though it would burst with wind; *violent belching after eating*, lasting from one meal to the next; irresistible desire for sweet things, especially sugar. When these symptoms are present, whatever the diagnostic name, the “best medicine” for the sick one, is *argentum nitricum*.

There is a specific for every individual sickness, but no specific for any disease *per se*. No two people are sick precisely alike though their sickness may bear the same label. Your in-

dividual symptoms portray a certain image of sickness, and the medicine which has produced on healthy subjects a *similar* image, is your specific.

Symptoms, subjective and objective, are the only means by which any man can know disease; and a given medicine will cure any patient provided it has produced on healthy subjects an image of sickness, expressed by symptoms, *similar* to that of the patient.

In the July CRITIQUE, quoted from "The Homeopathic World," I find: "The Lancet in May contained a record by Dr. Williams of a most interesting series of cases of nocturnal enuresis. In one very troublesome case of this complaint the doctor was led to give *thyroid* extract with great, indeed complete success. Encouraged by this result he tried the remedy upon other cases and achieved more successes, although failing signally in one instance." Then follows the opinion that "had he given a less quantity the one failure of his series might well have been another success." The heading of said article explains the failure, viz.: "*Thyrodin for Nocturnal Enuresis,*" instead of the patients. That some cures resulted was a demonstration of that kind of science which gives to one a lucky paddle when a fortune wheel is turned, and just as such, a lucky holder will again buy that paddle so this kind of a prescriber will give thyroidin to *every case of nocturnal enuresis that comes along.* It is this brand of homeopathy that has disgraced Hahnemann.

What every striving, energetic, studious homeopath must learn is that thyroidin, nor any other medicine or combination of medicines, cannot possibly be a specific for "nocturnal enuresis" or any other disorder in itself. However, thyroidin might prove to be the similimum for a patient who, as a part of his image of sickness, has bed-wetting; but it does not follow that the next case of bed-wetting will require the exhibition of thyroidin. No man can ever practice homeopathy successfully until he learns this lesson.

Cina is said to be the best medicine "for worms;" but if the patient has a raging fever, red face, convulsions, etc., cina will prove as futile for the worms as for the patient. However, if there are convulsions, dilated pupils, intense fever and a *pale*

face, or a bright red spot on each cheek the rest of the face being pale and around the mouth and nose *very white*; and if that child wants to lie on its stomach, grinding its teeth in its sleep and keeping up *a continuous swallowing*; and if finally it is noticed that its urine turns milky-white on standing, the very best medicine in the world *for that patient*, is *cina*.

A medicine is not homeopathic because prepared by a homeopathic pharmacy, or carried by a homeopathic physician, or issued in the homeopathic form; but when the proving of that medicine in the totality of symptoms produced on healthy men and women is similar to the picture of symptoms present in the patient to be cured. Then and only then, is that medicine homeopathic to the case. Such a medicine is said to be homeopathically indicated; and any medicine in any case at any time which, in its proving, is similar to the image of sickness to be extinguished, is the *best medicine* for that patient at that time.

A certain physician in one of the states was told by a medical drummer that a doctor in the city of blank had a specific for constipation; that he never failed to cure the worst cases. This physician immediately wrote the doctor for the secret. The answer came: "*nux vomica*." Now had the enquiring physician been a Hahnemannian homeopath he would not have wasted a postage stamp and made a fool of himself. He would have known that no man living or dead ever had a specific for constipation. However, there is a specific for every *patient* suffering from constipation as part of his sick condition.

If there is an irritability of the large intestine producing *an ineffectual urging to stool*; or when the stool does take place it is incomplete, unsatisfactory and leaves the patient with the feeling that *more faeces ought to be expelled*; or when there is much straining with a very hard stool there is left an *aching pain in the rectum*, but no desire to sit and continue to strain, like *mercurius*, then *for such a patient nux vomica* is the "*best medicine*" in the world; and, if instead of constipation there is diarrhoea or dysentery, and there is present this *ineffectual urging to stool*; and at times a soft stool mixed with mucus and blood, or clear blood with the faeces, and the patient tells you he often goes and makes the effort *without any stool at all*, then *for that patient nux vomica* is the "*best medicine*."

Again: the menses are dark and thick, too soon and too copious, accompanied by abdominal colic, or nausea, or deafness, or all these; the menstrual flow ceases the third or fourth day and after a few hours or a day or two reappears. Following the menses is a very acrid leucorrhœa excoriating every part it touches. This leucorrhœa is likely to be dark brown at first and very offensive, but in a day or two it becomes a deep yellow and has an odor like fresh green corn. Accompanying this leucorrhœa is a dragging pain in the back, relieved by motion and worse during rest. With all this there is frequent and painful urination, for the labia swell and become excoriated. And there is intolerable itching in the vagina and about the vulva, and the poor woman is beside herself. Now you may give this disorder any name you choose—dysmenorrhœa, say; there is no specific for dysmenorrhœa. But the “best medicine” on God’s green earth for that poor woman, is *kreasotum*.

“From all this it is clear that these useless and misused names of diseases ought to have no influence on the practice of the true physician, who knows that he has to judge of and to cure diseases, not according to the similarity of the name of a single one of their symptoms, but according to the totality of the signs of the individual state of each particular patient, whose affection it is his duty carefully to investigate, but never to give a hypothetical guess at it”—Hahnemann.

For hygienic purposes and to allay the anxiety of the family; to know the probable duration of the disorder and its infections or contagious nature, it is all well and good to make a correct diagnosis. But what I wish to impress the reader’s mind with is, that in selecting the curative remedy in any given case, the *name* of the malady is wholly useless. The all important duty of the prescriber is to gather up the odd, unusual, peculiar symptoms which characterize that image, ever bearing in mind that they always belong to the individuality of the *patient*, and not to the disease as such, and then choose that medicine which has produced the *similar* when tested on healthy human subjects.

Galesburg, Ill.

SPECIAL ARTICLE

THE GONORRHOEAL RHEUMATICS.

By R. del Mas, Ph.D., M.D.

A FEW YEARS AGO, I was still going to school, learning how to cure on the contraria principle, when a friend of mine, going to the same school, was suffering from "specific rheumatism." In those days, that thing was new to me, and incomprehensible. My friend had it in the left heel only. With that foot he walked on tiptoes. He would have given a good check for his cure, which the best specialists of quite large cities could not preform. Now that I have less hair on my head than I had then, I feel confident the indicated remedy would have cured him.

It is admitted that this "rheumatica specifca" follows upon suppressed gonorrhoea, or local treatment of "urethritis specifia." It is not attended with high fever and great pain, and will hardly ever take a "wandering" notion. If it is scientifically treated, like that of my friend, its duration is indefinite, and ancylosis may result. There's money in it—in one way. Let us see the other way.

The gonorrhoeal patients most likely subject to have this kind of trouble are thuja and medorrhinum. I said most, because there are others, as we shall see. I quote from Kent: "When that sycotic discharge has been suppressed, it has produced a miasm with soreness in the bottoms of the feet and in the knees, and particularly through the back and loins and sciatic nerves, in the knees and ankle joints. Sometimes it affects the upper extremities, but particularly the lower. Most violent aggravation when keeping still, like rhus, great aching that increases so long as he keeps still, he is very often compelled to keep the bed, and then he constantly moves and turns while this

group of symptoms would be cured by rhus when the case is not sycotic, where these symptoms come from suppressed gonorrhoea medorrhinum or thuja will most likely cure." *Thuja is full of erroneous fixed ideas. When his head pains, he feels a nail is driven into his frontal eminence, while medorrhinum, like lil-tig, has a crazy sensation in the occiput. The pain of thuja extends into the eye, and as far as the eye is concerned heat relieves, but the rest of the head wants cool open air. It is very striking, it is thuja only. High living, sour and stimulating stuffs aggravate thuja in all his troubles; and cold damp air does the same. He has an after-midnight aggravation also. (sars., sulph.)

When medorrhinum thinks of his pains, they increase. His appetite is ravenous. He cannot talk without weeping. Kali carb and pulsatilla do the same when they relate their complaints. Time passes slowly. He trembles all over. His irritability is excessive; his desire for liquor also. He has a morning diarrhoea like thuja; but if his stool is difficult, he must strain much and can only void it if he leans very far back. His pains are constricting, aching, drawing, much aggravated during an electrical storm. His heels and balls of feet are very tender (ant-e., puls.), when he attempts to walk. He sometimes must go on four paws in the morning when he gets up; and the pains make him angry and tearful; but, after having walked awhile he feels better. His lower limbs, when they ache, are in constant motion, and around the ankles and knuckles get puffy. Damp weather and the sea shore ameliorate him (reverse of sep.), Remember his "barrel" cough after suppression of gonorrhoea.

Pulsatilla, the tearful pulsatilla, so quiet and gentle, who takes years to make up his mind about anything. On telling what ails him, he cries. His gonorrhoeal arthritis has a "wandering notion," and seeks gentle motion and cool air. He never could mislead one. Natrum mur. does not like bread; this patient cannot eat fats, rich food, pastry, pancakes, pork, cabbage, ice cream or any warm food without feeling disturbed. His mouth is very dry, still he has no thirst. He never could lie on the left side (sep.).

*Kent Mat. Med. Page 940.

He cries with the pains. His soles pain and are very tender also. The pains of *pulsatilla* shift rapidly, and those of *medorrhinum* and *thuja* never. *Pulsatilla* has a mild temper, the others never. Changeableness pertains only to *pulsatilla*. As to the one-sided sweats and desire for cold food, *thuja* and *pulsatilla* go hand in hand; but do not talk onions to *thuja*. The one always in a great hurry is *medorrhinum*. If in the hip-joint, the trouble of *pulsatilla* is as if the joint were dislocated; if anywhere else it is tearing, drawing in character. His soles feel as though they had been beaten; in his heels are boring pains. He has a great inclination to stretch out his feet, which burn on the back and in the soles. He has a vertigo while sitting, a disagreeable taste in the mouth in the morning. His aggravation is noticed especially when rising after sitting long, and in the evening. He grows faint in a warm room (*sepia*).

As natural followers of *pulsatilla*, we notice *kali bi*, and *sepia*. The former has wandering pains, sticking, burning, tearing, drawing in type. His joints crack on slight motion. At times we notice numbness accompanies the pains which are localized in small spots the tip of a finger can cover. He very likely will discharge yellow, tough mucus from some mucous surface. If he drinks beer, he aggravates his pains and stomach. He is sexually indifferent. His headaches are preceded by blindness, which disappears as the headache progresses. His pains are ameliorated from heat and eating and aggravated by cold and when hungry; he is, in fact, very chilly. His pains touch the bones, and will often alternate with gastric or intestinal complaints. His tongue shines like a glass bottle. He may vomit his food sour two or three hours after eating. He may be a regular debauchee and a drunkard. His urine is very apt to be passed with difficulty on account of the ropy, yellow mucus it contains, and accompanied by a sensation as if a few drops of it remained in the urethra, which dribble away afterwards (*sep.*, *thuja*). The urine of *pulsatilla* dribbles while walking. *Thuja* has to urinate five or six times before he can empty his bladder.

Sepia has a sallow, wrinkled, prematurely old face. He is sad, irritable, chilly, restless. His motion must be violent to do him any good. He has a gnawing hunger that nothing satisfies,

or very little so. His ability to love is lost. His bowels are constipated and when they move they are left with a lumpy sensation in the rectum (more so in the female). Very likely a painless, milky drop remains as a souvenir of the infection. Anything vexes him; he will scold for anything; from door to door will he peddle his grievances. On beginning to move, he feels worse; but continued, violent exercise ameliorates him. He is very apt to have a sore back from loins to coccyx which this kind of exercise or hard pressure ameliorates, and which sitting, but especially kneeling, intensifies. Impotence is his. The *ball of the great toe* feels painful to the bone. It seems that trouble is willing to confine itself in the back. A change of weather, cold and wetting aggravate it. The patient is very chilly. It must be remembered that kali bi. and sepia could not follow pulsatilla, if the patient remained warm-blooded. A patient having the indifference of sepia and the warmth of pulsatilla is called *fluoric acid*; and although he is syphilitic or mercurial, or both (kali iod), there is nothing in him to render him immune to sycosis. In fact, if he catches it, you may rest assured he will have a hard time with it; preputial oedema will be there. Fluoric acid has the warmth and hunger of iodine, and he changes his mistresses as often as phosphorus, pieric acid and lachesis. The sepia woman does the same, although like her friends graphites and phosphorus she has an insensible vagina, yet there is hardly any woman more amorous than lachesis.

It must be said here between parentheses that whatever is read in this little article applies to women as well. They still have left a few apples of the Garden of Eden and know how to offer them to eat. If Chamberlain gonocoecus be the originator of the *dose* and not its companion of travel, will any one tell me where he was born? How wise was He who, through disease, could bring man and woman back to their senses! How great is the scientist who never could step beyond matter! What a relief for the physician who *knows* (?) that with calomel, bismuth, atropine, pilocarpine, morphine, tonics, baths, electricity, massage and the knife, given by the pound, by the day, by the buccal and rectal gates, internally, externally and eternally, he can remodel the human clay! And, if that fails him, can he not resect the

vasa and oviducts? That is the shortest route from my home to the Golden Gate.

But, to return to *fluoric acid*, we will say that, with oedema of the prepuce, his erections and desires are most violent (we should say were, because when the arthritic pains begin, he has passed the preliminary stage of gonorrhreal maneuvers). His left testicle "stitches" (*thuja*). His genitals have an offensive (*psor.*, *sulph.*), pungent odor (sweetish smelling, like honey, *thuja*). *Pulsatilla* has an affinity also for the left testicle (*clem.* and *rhod.* favor the right) with swelling, and a great aggravation while sitting. *Cantharides* claims to follow *fluoric acid* very closely; but he is not "chronically" lascivious; and his bladder is so irritated that, every few minutes, he must pass a few drops of bloody, burning urine, with drawing pains in the spermatic cords while urinating (*clematis*—during and after, *capsicum*). The pains, erections and desires make *cantharides* restless, frantic. His desires are due to the congestion of the parts only. In *fluoric acid* this particular amplifies the mental excitement. *Cantharides* is known for its intensity and rapidity in inflammations, with burning pains, tending to gangrene (*ars.*, *merc-cor.*). With strangury it possesses a desire for stool. I recently had a case of gonorrhea in a married man whose bladder and rectum symptoms were in accord with the generals of *merc-cor.* But from this he ran into phosphorus, and afterwards into *sepia*. He had a very good dose. He comes from a deeply psoric family.

Lycopodium is prominently impotent. His genitals raise moist condylomata. His urine is muddy, with brick dust sediment. In the night he must get up often to void a watery urine, the desire for voiding it being accompanied by pains in the kidney region, which leave him after urinating. He is very flatulent, a mouthful of food may satiate him, and yet his stomach "goneness" may not be relieved by food (*sep.*). He looks old, sickly; wrinkles cover his face, which, with the neck, is fleshless. The slamming of a door troubles him; any noise starts him up, and the fears strike him in the epigastrium. When thanked, he cries. On meeting a friend, he cries. Crying relieves him. His aches and weeping will have an aggravation from 4 to 8 p. m. He cannot stand a warm room, and heat causes him to

weep (puls.). His veins and mental symptoms are aggravated by warmth of any kind. He is very restless and motion relieves his pains. *His soles are swollen and painful.* He feels stitching, burning pains in the soles and heels. His feet become sore from profuse sweat, which is offensive (*thuja*) and cold. (puls.). Heat agrees with his joints, throat, stomach, and disagrees with him. He is easily aroused to anger. He craves the open air. Continued motion ameliorates his pains. If he walks to the point of warming himself up, he is worse (mind, lungs, heart, skin). Warm wraps aggravate him, also (puls.). He wants the open air but not the cold air. *Pulsatilla* is the same; they differ, however, in temper.

Up to now we have seen restless individuals; *pulsatilla* wants slow motion, open air and cold applications; *sepia* desires violent motion, and warmth of any kind, but not a warm room; *lycoperdium* is satisfied with moderate motion, open air and warm applications; *thuja* wants the *rhus* motion and warmth, or a dry, warm atmosphere, and still the warmth of the bed aggravates him as much as it does *lycoperdium*; *medorrhinum* wants the motion of *arnica* and the damp weather of *causticum*, plus the seashore air. *Kali bi* is satisfied with rest, heat and food. *Pulsatilla* coughs constantly in the evening after lying down; *sepia* is prevented from sleeping on account of an incessant cough; *lycoperdium* has a dry, hacking cough. *Fluoric acid* wants cold food, cold air, cold bathing. *Sepia*, *pulsatilla* and *lycoperdium* are tearful and timid. *Kali bi* and *sepia* discharge tough, offensive, green masses or crusts from the nose. *Fluoric acid*, *lycoperdium* and *sepia* have an empty, gone feeling in the stomach that food relieves very little; their hands perspire. Their foot sweat is excoriating. *Sepia* and *fluoric acid* are indifferent to their relatives, and, with *lycoperdium*, quite lascivious; *lycoperdium*, *pulsatilla* and *medorrhinum*, *sepia* and *thuja* have strong sexual desires and weak or wanting erections. *Kali bi* and *pulsatilla* have a tendency to cause their pains to travel, the former says he has a pressing pain, and the latter a catching, or stitching pain in the region of the heart. They are both light-haired, and, if *pulsatilla* is florid, the other is corpulent. *Lycopodium*, *pulsatilla* and *sepia* are quite stingy. If *kali bi* is indifferent about

his condition, the reverse is present in pulsatilla and sepia. The desire for open air is in pulsatilla and lycopodium; the aversion to it in sepia, although, like pulsatilla, she faints in a warm room.

After Lycopodium, we naturally think, in a complementary way, of sulphur or psorinum. The latter is characterized by weakness in the joints affected, as if they would not hold together. *His tibiae and soles feel as after too much exercise in walking;* they have tearing, wandering pains. His back is weak, that of sulphur is bruised and stitches. Sulphur pains are drawing, tearing, stitching in type. His joints are stiff. He cannot walk erect. Standing is his most disagreeable position.* Pulsatilla is their precursor also. Sulphur has a stiffness and heaviness of ankles. His knees are stiff and sticking. His left ankle, on standing and walking, feels as if sprained.

While the "indigestion of the apple" is going on with unfurled sails, we notice that cannabis sativa and clematis have arthritic pains. The former has a frequent desire to urinate, and burning, smarting pain, extending from the meatus to the posterior portion of the urethra, while urinating. During urination the meatus bites. At times the burning is felt only at the close of urination. A tearing pain extends in zigzags along the urethra (sars.). While finishing urinating the sphincter vesicae closes spasmodically. The urethra is quite sensitive to touch; he must walk with legs held apart. A burning pain felt in the anterior portion of the urethra gives an almost constant desire to urinate, even when there is no urine to pass. On walking there is vertigo, with a tendency to fall sideways. There may be also as a concomitant the sensation of drops falling on or from single parts. As to the pain, we notice *periosteal pains along the long shafts,* giving, on motion, a feeling as if they were bruised. Eating makes all the limbs tired, which motion ameliorates; but the small of the back is aggravated after the least exertion. Cramps in the calves are felt on walking; cramp-like pains are also present in the metacarpal bones. The feet feel made of lead on as-

*To form a closer acquaintance with these two patients, the reader is referred to "The Last Drop" and the "Lean Wolves," two articles recently publish by **The Critique**.—Note of Author.

cending stairs, and after walking and eating. In Kali bi. we notice the partaking of food brings a general relief as to the rheumatic pains; the reverse is true of cannabis sativa, although food relieves him. This is a sort of hair-splitting.

As to the value of cannabis sativa as an antisycotic, we will quote again from Kent: "In the non-sycotic variety of urethral desire, cannabis sativa is sufficient, but those cases that have proved to be sycotic cannabis sativa left uncured, it ameliorates the burning during and after urination and the thick, yellowish-green discharge, but some other remedy had always to follow, when they were shown to be sycotic. It is not so with thuja, because it is capable of finishing the case."**

Clematis erecta feels weak in all the limbs; better while moving in the open air (lycopodium, pulsatilla). Immediately after eating, his limbs feel as if beaten (as if tired, cann-sat.). The limbs feel as heavy as lead. *A violent pressing pain is complained of in the ankles, toes, knees, elbows, shoulders.* The muscles twitch. Electric shocks are felt on falling asleep (arg.-met., arg.-nit.). As concomitants, we notice the inguinal glands (right side especially) are swollen, inflamed, painful (puls., rhodo.); the soreness extends up the spermatic cord, and during urination a drawing pain follows its course into the abdomen. If a stricture exists, the urine will dribble after urination (thuja) and sometimes involuntarily (puls.) especially while sitting (sars) or walking, and be intermittent in its flow (lyc., puls., sulph., thuja). To describe it graphically: The urine starts and flows in a feeble but burning stream; then it sticks in the urethra, flows again, but at the end of urination the burning continues, and a sensation as if some urine were left in the urethra is felt, while drops dribble away involuntarily. Kali bi says that after micturition it seems as if a drop were remaining back in the urethra, which it is impossible to expel; this drop burns and worries him for a long time with fruitless efforts to expel it. Thuja has the sensation in the urethra as if a drop of urine were passing along the urethra from the neck of the bladder, sometimes with drawing and cutting pains. Sepia has a sensation as if drops

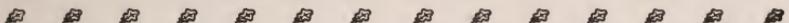
**Kent, Mat. Med., p. 943.

came out of the bladder; lycopodium, during micturition, feels his urethra itches (sars.); very often the itching continues after. Clematis, while he thinks to have finished, suddenly a quantity of urine will pass involuntarily in drops. After urination pulsatilla feels pains in the neck of the bladder, extending to the pelvis and thighs; and in bed, whenever he lies on his back, he has a desire to void urine; if on his left side, he has rapid palpitation and want of breath. If sepia has any chest symptoms they will be ameliorated by the pressure of the hand. Sepia and pulsatilla have their sleep disturbed from cough. The cough of sepia is short and seems to come out of the stomach. If pulsatilla sits up in bed the cough disappears, but returns on lying down; and the cough is dry at night and loose during the day. The dispositions of the two patients are opposite, so is their behavior in regard to the open air. Sepia feels stitches in the left chest and scapula when coughing and breathing; pulsatilla feels them in both sides and only when lying down or coughing; while on the back dyspnoea and vertigo occur. Sepia is indolent, pulsatilla morose. Both faint in a warm room. Both are aggravated from the cold air; but the former shrinks from the fresh air and the other craves it. Sarsaparilla and phytolacca claim a place in this already too long vagary and so does copaiba; but the practising readers of THE CRITIQUE will pardon me if I trust in their capability of knowing where to find or locate their healing features, as I feel sure they are of the best brand homeopathy ever conceived.

Centerville, Minn.



S E L E C T E D



LEGAL STATUS OF VACCINATION IN IOWA.

THERE ARE IN THE STATE many mayors of cities and health officers who are homeopathists. These officers believe in quarantine laws and in the enforcement of such laws. They believe in vaccination but have honest convictions as to the best method of vaccination. Every lover of justice and fair play rejoiced when the board of health, during a recent revision of its laws, omitted its definition of vaccination. The reasons given by the member who moved to leave out the definition were that it caused friction and more than that, the court in three counties had decided that the board has exceeded its authority when it introduced the definition.

Those who rejoiced because the definition was expunged will be pained and provoked to learn that at a meeting of the board on January 22nd, a member, an old school physician, attempted to re-instate the old definition. These same lovers of justice and fair play will be further saddened to learn that the secretary of the board, who was elected to his position by the homeopathists and eclectic members as well as by the votes of the allopathic members, who should be the secretary of the entire board and not any part of it, was active in the attempt to have the definition reinstated. All will be incensed to know that this attempt was made on the day before there was to be a trial in the court at Red Oak of the same question which had been tried at Des Moines, Iowa Falls and Council Bluffs and that the allopathic member who offered the resolution and the secretary of the board were at Red Oak the next day to assist in the attempt to do an injustice to a homeopathic physician, holding a license from the board, the injustice being an attempt to have the certificate of the homeopathist discredited by the school board at Red Oak.

We are glad to be able to state that the resolution to reinstate was tabled by a majority vote of the board of health.

We are also glad to state that in the case at Red Oak, where a suit was brought to restrain the school board from prohibiting the scholars who had been vaccinated by the internal method, from attending school, that the Court granted an injunction; thus scoring another victory for Homeopathy.—*Iowa Homeopathic Journal*, Feb. 1909.

HOMEOPATHY IN CANADA.

IT IS ALWAYS PLEASANT to note the growth of homeopathy and especially cheering to Britons when the growth takes place in a British colony. The subjoined article from the *Chironian* is therefore a cause for congratulation:—

"The cause of Homeopathy in Canada has had periods of success and of depression. Generally the laws have been manipulated so that old-school physicians have controlled all examinations for practice; in fact, at the present time Quebec is the only province of the Dominion having a separate board of examiners. Years ago the Homeopathic Association secured a charter from the legislature granting a homeopathic board of examiners; this board is still in existence and now consists of Drs. E. M. Morgan, H. M. Patton, and A. R. Griffith. Montreal is a city with a population of over 400,000—two-thirds of whom are of French Canadian extraction. It is a city of great wealth, and is keeping pace with the very rapid development of the Dominion. As the great inland seaport it will ever hold a prominent place in the shipping and industrial world. A little over ten years ago a private house was purchased and converted into the first homeopathic hospital ever established in the province. Soon a large addition was erected with a fine operating room and accommodation for a number of private and public patients. In 1904 the hospital was incorporated and three houses adjoining were purchased. Improvements were made whereby the hospital now has twenty private rooms and five public and semi-private wards, giving accommodation for fifty patients. W. T.

Gear has recently been elected president of the board of governors. He is a man of wealth and great commercial influence, and under his administration the hospital will doubtless make still greater progress. There is a training school for nurses with twenty pupil nurses under the direction of Miss Ida F. Bulmer, R. N., lady superintendent. The medical and surgical work of the hospital is looked after by Drs. A. R. Griffith, medical superintendent; O. W. Broadley, J. T. Moringer, A. D. Patton, and E. M. Morgan.

"Canada probably offers better opportunities for homeopathic physicians than any place in America. The country is growing in a marvelous manner. Thirty years ago thousands of Canadians were emigrating to the United States. The situation is now reversed. Last year 60,000 Americans came to Canada, and this number will be duplicated this year."—*Homeopathic World, London, England, July, 1909.*

THE PRESIDENT-ELECT OF A. I. H.

JAMES W. WARD, M. D., who was elected president of the American Institute of Homeopathy at its recent meeting in Detroit, was born in Minneapolis, Minn., March 14, 1861; he removed to California in 1871, graduated from the San Jose high school and began the study of medicine in Santa Cruz, Cal., in August, 1878, and graduated from the New York Homeopathic Medical College in 1883. In the same year he received appointment for Ward's Island Hospital staff, which position he resigned to become, by competitive examination, the resident physician of the Hahnemann Hospital of New York. After two years' service in the Hahnemann Hospital of New York he settled in San Francisco in 1885. He lectured on physiology in the Hahnemann Medical College of San Francisco for three years; was professor of gynecology and abdominal surgery in the Hahnemann Medical College of the Pacific twenty-one years; president of the California State Medical Society 1900 at San Francisco; member of the Board of Health of the State and County of San Francisco January 1, 1902; president of the Health Department

of San Francisco, from January, 1903, to March, 1907, inclusive, resigning voluntarily from the Health Department and receiving the privilege of appointing his successor. The work done in the Health Department was with special reference to the introduction of homeopathy into the various municipal appointments under the direction of the Department of Health. This work has been of lasting importance and has pushed homeopathy in San Francisco fully a quarter of a century ahead. The establishment of all the branches under the control of the Department of Health in substantial form has created a permanent and fixed position for homeopathy, fully recognized at the present time. The management of the earthquake and fire periods of 1906 and the subsequent control of the situation so that no epidemic of any kind followed the disaster stands alone in history following such disasters. His practice is confined largely to surgery into which he brings the strong convictions of the wide range and absolute necessity of careful prescribing as a feature in securing surgical success. As one of the founders of the Hahnemann Hospital in San Francisco, he has given to San Francisco the strongest clinical arm for teaching in the Hahnemann Medical College of the Pacific. He has held the position of dean of the Hahnemann Medical College of the Pacific, and is just entering upon his tenth year of service. He is a member of the San Francisco County Homeopathic Society, the California State Homeopathic Society, honorary member of the Southern California Homeopathic Society, member of the American Institute of Homeopathy, and an honorary member of the British Homeopathic Association.—*The N. A. J. of Homeopathy.*

HOMEOPATHIC VACCINATION SUSTAINED BY A PENNSYLVANIA COURT.

THE QUESTION of the validity of what for want of a better name is termed "homeopathic vaccination" was argued before Judges Frazer, Shafer, and Haymaker of Pittsburg, Pa., in May. The validity of that vaccination was affirmed, and the vaccination declared legal. This rather important decision was

not mentioned by the newspapers (so far as we saw) outside of Pittsburg.

The facts are as follows: Mr. H. E. Lee had his daughter vaccinated homeopathically by Dr. W. R. Stephens, of Wilkinsburg, Pa., who then gave a certificate of vaccination. This form of vaccination, it may be stated here, consists of giving pellets, properly medicated on the tongue; no evil effects ever follow this method of vaccination, and it is known by those who have investigated the matter to be far more protective than the crude method of forcing the raw poison through the skin into the blood, where if "successful," it causes an angry ulcer and sometimes a long spell of sickness, and sometimes death. W. E. Borger, principal of the school that the child attended, refused to accept this certificate, and the question of its legality or validity was the one before the court.

We cannot follow the arguments here, but in a general way they—those in favor—were based on the fact that as the law of the state recognizes the medical practice of Homeopathy, therefore, public officials cannot discriminate against the form of vaccination peculiar to Homeopathy, in favor of the allopathic method. That is the substance though not the form of the plea for the homeopathic method, and the court decided that the child must be admitted to the school on that certificate. If the case is not appealed and reversed, this will be the rule in Pennsylvania. The allopathic officials will be very foolish if they contest this decision, for it opens an honorable way out of the difficulties they experience in enforcing a law that a vast majority of intelligent people bitterly oppose. There have been too many life-long injuries inflicted, and deaths by this survival of 18th century medical practice for any one to longer enforce it on an unwilling public.

The word "vaccination" is really a verbal malformation. It is derived from the Latin *vacca*, "a cow" but it is not really the cow that originates the virus used but a pox occasionally found on the udder and presumably contracted from the hands of some milker diseased with the pox; so in reality "poxination" would be the truer word. If the cow from which this pox virus

is obtained is suffering from any other disease then it is the pox plus the other disease, as was recently discovered when vaccine, or pox, virus started an epidemic of the dreaded foot and mouth disease.

All things considered it would be the part of wisdom for the authorities to accept the court's decision, as was done in Iowa, where even the allopaths are now adopting the homeopathic method of vaccination.—*Homeopathic Envoy.*

THE JOURNAL QUESTION AT DETROIT.

THE JOURNAL QUESTION was the all-absorbing item of interest and fortunately it was settled amicably and probably for the best interests of the profession. Despite the heat and the various views, everyone looked at the matter in a temperate and conciliatory manner, and so far as we know none of the wounds were very deep. It was indeed a momentous subject. The journalists of our school naturally felt that an institute journal as started by the journal committee gave unfair advantage to the elect and were in no sense willing to let it continue under that plan. With few exceptions every journal of our school was against it and they made themselves heard through their representatives there. To them it was a serious thing to see the journals which had borne the brunt of the burden in the past crowded to the wall by an institute organ which would certainly become a monopoly. They made members realize that it would not be best or right to starve or kill the independent publications which so far had preserved and kept intact the great organization and power of our school. They demonstrated clearly that it would not be wise to dam the tributaries which made the larger stream possible and that the local influence would be unorganized and would disintegrate without their official organs which could never survive the existence of an all powerful organ backed by the Institute. The opposition claimed that it would help us but they were wrong in their reasoning, particularly as they had had no experience along this line. Every journalist was naturally against the propaganda idea with its trust organ, but inasmuch as so many members were anxious to have an Institute journal of some kind a compromise was suggested

to the effect that this organ should publish a bulletin or perhaps a regular journal and accept no advertising which was not distinctly homeopathic. This would then leave the means of existence still in the hands of independent journals which could not live for a day without this patronage.

The question was argued up hill and down until a far more satisfactory understanding was reached. This was in effect to allow the present journal to continue as it is for the rest of the year and then put the whole matter up to the trustees to settle at a later date on a basis which will be fair to the other journals and for the best interests of the Institute and the profession as a whole. The trustees elected are as follows: Drs. McClelland, Porter and Custis for three years; Drs. Boericke, Royal and Cobb for two years, and Drs. Sutherland, Mann and Jones for one year. It will at once be seen that these are capable and fair men who without doubt will consider the question in all its phases and be able to reach a conclusion which will bring about the greatest good. The present journal committee, as we understand it, will continue to act until the middle of September, when the board of trustees take office and will assume command of the journal question. In the meantime everything remains in *statu quo* until the beginning of the new year. One thing, however, was done by the journal committee which deserves commendation and that is the immediate appointment of Dr. J. Richey Horner as associate editor. A better man could not have been found. One thing was clearly in evidence as a consensus of opinion and that was to the effect that if a journal is established, it must be distinctly an Institute journal edited and managed by and for the American Institute of Homeopathy.—*Editorial in The Clinique, July, 1909.*

“NON-SECTARIANISM.”

THE PRACTICE of “non-sectarian medicine” is the test of membership in the Hennepin County Medical Association, according to a statement made by the executive committee, of that organization. Physicians joining the Ramsey County Medical Association promise not to support or adhere to “any

exclusive dogma or school," but the applications recently made by the local homeopaths are differently worded. The committee's statement to *The Journal* is as follows: In the issue of *The Minneapolis Journal*, Wednesday evening, May 5th, it was stated that several prominent physicians of the homeopathic school had joined the Hennepin County Medical Society. In this connection, the following statement was made: "Every physician applying for membership in the society makes this promise, among others: 'I agree to practice in accordance with the proper usages of the profession, and will in no way profess adherence to or give my support to any exclusive dogma or school.'" Applicants for membership in the Hennepin County Medical Society make no promise or agreement except the following: "To the members of the Hennepin County Medical Society: The undersigned represents that he is a reputable and legally registered physician, practicing non-sectarian medicine; has practiced six months in Hennepin County and desires membership in your society." Members of the Hennepin County Medical Society are not allopaths; they are not homeopaths; they are doctors of medicine and surgery. Each member is free in every case to select and employ any instrument, method of treatment or remedy, in any form or from any source, which science or experience has taught him to be the best for the prevention of a disease or the cure of his patient. It was with this understanding that the physicians mentioned were selected to membership in the society.—*Newspaper Clipping*. Yes! this is their "method" now.—*Medical Counselor*.

HOW ABOUT A. I. H.?

WE PAY OUR DUES to the American Medical Association. We get the *Journal*. Will someone near to the "House of Delegates," tell us when we may expect some real new and original matter to be printed, instead of the half obsolete sophistry which we feel some times appears on its pages. The "lay member," the man who never hopes to be a delegate, the real hard worker for small pay, clamors for something within his domain. He asks for the lamb's share at least.—*Exchange*.

COMMUNICATIONS

CHICAGO LETTER.

D R. J. H. LOW has gone to his Virginia farm for the summer months.

Dr. A. H. Gordon is spending his vacation in California this year.

Dr. Charles E. Kahlke is spending his vacation in the mountains of Colorado.

Dr. Julia Strawn is spending her vacation in the West and will visit the Seattle Fair.

Dr. A. L. Blackwood has been elected vice president of the Chicago Board of Education.

Dr. Mary E. Hanks has returned from an extended European trip, much improved in health.

Dr. J. E. Gable, Hahn. '09, has located in Evanston, Ill., where he already has a large osteopathic practice.

Dr. H. H. Baker has been seriously ill for the past few months. His many friends hope for his speedy recovery.

Dr. N. B. Delamater is slowly regaining his health on his farm in Florida. His friends are glad to hear of his improvement.

Dr. Roy L. Barr, Hahn. '08, has completed his term as interne in Hahnemann Hospital, Rochester, N. Y., and is seeking a location.

Dr. Sarah Hobson was elected second vice president of the A. I. H. at the Detroit meeting. She is a hard worker and deserves this honor.

Dr. C. C. Burlingame, Hahn. '08, has been appointed one of the assistants in the Massachusetts Insane Hospital, Westboro, Mass. Dr. C. A. Washburn, Hahn. '08, is also at the same institution.

From September 7th to September 21st, 1909, Hahnemann Medical College, Chicago, will give a special course of lectures on Homeopathy and Materia Medica. The leading men of the College will give lectures and hold medical clinics to demonstrate homeopathy and its application. Every one is invited to come and attend. Among the lecturers are Doctors Kent, Blackwood, Dienst, Grimmer, Copperthwaite, George, Fitzpatrick, Halbur, Cobb, Bailey, Strawn and many others.

Chicago, Ill., July 17, 1909.

EDITORIAL SECTION

JAMES WILLIAM MASTIN, M. D., Managing Editor, Majestic Building
J. WYLIE ANDERSON, M. D., Business Manager, Steel Block

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

PRESIDENT-ELECT OF THE A. I. H.—In the department devoted to "selected" articles I am publishing a short sketch of the president-elect of the American Institute of Homeopathy, Dr. James W. Ward, of San Francisco. It is quite unnecessary

that comment upon the conditions which resulted in his almost unanimous selection should be undertaken at this time, needless to add that his high standing as a physician and loyalty to the cause of homeopathy from the very beginning of his career to the present time, and the prospects that he will continue in this course to the end, makes it difficult to determine which has been most honored by the selection, Dr. Ward or the Institute of Homoeopathy.

The article in question is from the *North American Journal of Homeopathy* for July and I notice this publication gives a detailed description of the doings at Detroit in this issue, while the July issue of *our* Institute pet, some two weeks later, has about as little as could be said concerning the same and still claim connection with the cause.

M.

**PRESS AGENT" FOR THE CALIFORNIA MEETING
OF THE A. I. H.—***The Critique* takes time by the forelock and suggests to its good brethren of California in general and the president-elect of the American Institute of Homeopathy in particular, that they combine in selecting some one to serve as "press agent" for California whose duty it will be to inform those of us living in remote regions as to the glories and greatness of the Golden Gate commonwealth.

I do not mean that this bit of information be withheld from us until the very last moment preceding the forthcoming meeting, but that this piece of propagandistic business be set in motion right away, and kept moving until the bell taps.

To further this bit of missionary work THE CRITIQUE offers its pages for this particular purpose, or any other which will aid in making the 1910 meeting to be held at Los Angeles, one of the most largely attended and most enjoyable in the history of the Institute. Now then, Mr. California doctor man, get busy and tell us your joys and joys.

COMMITTEES FOR LOS ANGELES MEETING, 1910, A. I. H.—THE CRITIQUE takes great pleasure in presenting the personnel of the different committees for the forthcoming meeting of the American Institute of Homeopathy.

In making these selections the president-elect has attempted to avoid showing any particular prejudice for those who have heretofore appeared upon all the way from two to six committees and has distributed the conduct of affairs justly, judiciously and with a view of having as many members appear upon the program as possible, in order that the membership may be encouraged to come to this western meeting, and bring their co-workers as well.

The following is a complete list:

CHAIRMEN OF BUREAUS.

Materia Medica and General Therapeutics.—Chairman:—H. H. Baxter, M. D., Cleveland, O.

Clinical Medicine and Pathology.—Chairman:—Joseph P. Cobb, M. D., Chicago, Ill.

Homeopathy.—Chairman:—John P. Rand, M. D., Worcester, Mass.

Paedology.—Chairman:—C. S. Raue, M. D., Philadelphia, Pa.

Sanitary Science and Public Health.—Chairman:—Eugene H. Porter, M. D., New York City, N. Y.

COMMITTEES—ORGANIZATION, REGISTRATION AND STATISTICS.

CHAIRMAN:—Thomas Franklin Smith, M. D., New York City, N. Y.; William O. Forbes, M. D., Hot Springs, Ark.; Daniel A. MacLachlan, M. D., Detroit, Mich.; Augustus Korndoerfer, M. D., Philadelphia, Pa.; Gardner A. Huntoon, M. D., Des Moines, Ia.

HAHNEMANN MONUMENT.

CHAIRMAN:—J. H. McClelland, M. D., Pittsburg, Pa.; J. B. Custis, M. D., Washington, D. C.; Wm. H. Van den Burg, M. D., New York City, N. Y.; Burton Haseltine, M. D., Chicago, Ill.; Wm. Tod Helmuth, M. D., New York City, N. Y.

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CHAIRMAN:—Edward B. Hooker, M. D., Hartford, Conn.; C. E. Sawyer, M. D., Marion, O.; John L. Moffatt, M. D., Brooklyn, N. Y.; T. L. MacDonald, M. D., Washington, D. C.; W. B. Hinsdale, M. D., Ann Arbor, Mich.

HOMEOPATHIC PHARMACOPEA.

CHAIRMAN:—**Thos. H. Carmichael, M. D., Philadelphia, Pa.;** J. W. Clapp, M. D., Boston, Mass.; Lewis Sherman, M. D., Milwaukee, Wis.; Stuart Close, M. D., Brooklyn, N. Y.; E. Harper, M. D., New Orleans, La.

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CHAIRMAN:—**Alonzo C. Tenney, M. D., Chicago, Ill.;** Frederick A. Faust, M. D., Colorado Springs, Colo.; Willard A. Paul, M. D., Boston, Mass.; A. B. Morton, M. D., New York City, N. Y.; Wm. E. Cramer, M. D., Kansas City, Mo.

INTERNATIONAL BUREAU OF HOMEOPATHY.

CHAIRMAN:—**George B. Peck, M. D., Providence, R. I.;** James Searson, M. D., London, England; Richard Haehl, M. D., Stuttgart Germany; Alexander R. Griffith, M. D., Montreal, Canada; P. C. Majundar, M. D., Calcutta, India; Francois Cartier, M. D., Paris, France; Ernest Nyssens, M. D., Brussels, Belgium; Leon Brasol, M. D., St. Petersburg, Russia; Prof. S. de M. Saturnino, Rio de Janeiro, Brazil.

MEDICAL EXAMINING BOARDS AND MEDICAL LEGISLATION.

CHAIRMAN:—**John L. Tuller, M. D., Philadelphia, Pa.;** Lincoln Phillips, M. D., Cincinnati, O.; A. E. Smith, M. D., Freeport, Ill.; Wm. A. Keegan, M. D., Rochester, N. Y.; E. E. Weldon Young, M. D., Seattle, Wash.

TRANSPORTATION.

CHAIRMAN:—**Charles E. Fisher, M. D., Chicago, Ill.;** Thomas E. Costain, M. D., Chicago, Ill.; Wm. H. Watters, M. D., Boston, Mass.; T. Drysdale Buchanan, M. D., New York City, N. Y.; Clarence Bartlett, M. D., Philadelphia, Pa.; Sollis Runnels, M. D., Indianapolis, Ind.; Henry C. Aldrich, M. D., Minneapolis, Minn.; Grant S. Peck, M. D., Denver, Colo.

NEW MEMBERS.

CHAIRMAN:—**Homer V. Halbert, M. D., Chicago, Ill.;** Joseph Hensley, M. D., Oklahoma City, Okla.; M. A. Royal, M. D., Des Moines Ia.; Lamson Allen, M. D., Worcester, Mass.; Henry C. Jefferds, M. D., Bath, Me.; Franklin A. Ferguson, M. D., Portland, Ore.; Richard F. Tomlinson, M. D., San Francisco, Calif.; Charles F. Adams, M. D., Hackensack, N. J.; E. P. Mills, M. D., Ogden, Wash.; L. P. Posey, M. D., Philadelphia, Pa.; E. C. Williams, M. D., Hot Springs, Va.; N. A. Penoyer, M. D., Kenosha, Wis.; H. B. Stiles, M. D., Waco, Texas.

NATIONAL SOCIETY CLINICAL RESEARCH.

CHAIRMAN:—James Krauss, M. D., Boston, Mass.

PRESS.

EASTERN CHAIRMAN:—Wm. Rufus King, M. D., Washington, D. C.

WESTERN CHAIRMAN:—W. E. Nichols, M. D., Pasadena, Calif.; Gilbert Fitz-Patrick, M. D., Chicago, Ill.; Henry R. Stout, M. D., Jacksonville, Fla.; Elmer D. Olmstead, M. D., Spokane, Wash.

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COUNCIL OF MEDICAL EDUCATION.

John P. Sutherland, M. D., Boston, Mass.

LOS ANGELES LOCAL COMMITTEE OF ARRANGEMENTS.

HONORARY CHAIRMAN:—Dr. W. J. Hawkes. **Chairman:**—Dr. F. S. Barnard.

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Miscellaneous Matter

Send Us a Personal Item Occasionally

"No state was better represented at Detroit than Iowa."—Iowa Journal of Homeopathy.

* * *

According to the United States census reports there are 3,373 female sky-pilots to one river pilot of the same sex.

* * *

If women as a rule would purchase larger shoes and smaller hats they would be more comfortable, if not so conspicuous.

* * *

Dr. J. Richey Horner, after August 1st, will act as associate editor of the Journal of the American Institute of Homeopathy.

* * *

We regret to learn of the severe illness of Dr. Laura E. Stockdale who has been located at Pine, Colorado, for several years.

* * *

There are 8,119 female physicians in the United States. There is some compensation for this in the fact that but 126 plumbers wear petticoats.

* * *

Drs. E. G. and A. M. Linn, of Des Moines, Iowa, spent a week in Denver, Colorado, the latter part of June, so the Iowa Journal of Homeopathy says.

* * *

Dr. Thomas G. McConkey has moved his office and residence to the Hotel Lorin, 1156 Sutter street, San Francisco. So says the Pacific Coast Journal of Homeopathy.

* * *

Eighteen Iowa physicians attended the Detroit meeting of the American Institute of Homeopathy held at Detroit last June. Pretty good showing for any locality.

* * *

Harrison Greenleaf Sloat, M. D., is the new editor of The Chironian. The retiring editor tells in a touching manner how glad he is to get away from the grind of magazine management.

* * *

So far as we are able to ascertain not one homeopathic physician from Colorado attended the recent Institute meeting at Detroit; Denver, at least, was not represented even by the college contingent.

* * *

Dr. John W. Harris, a prominent physician of Denver, was married to Miss May Ormond, of Sacramento, Calif., the 16th of June. Accompanied by his bride he is now touring Europe in his automobile.

* * *

Dr. Angus, of Brighton, was acquitted of sending obscene matter through the mails, by United States Commissioner Hinsdale, the fore-part of last June. If all reports are true the doctor gave someone some good advice as regards bathing and other necessary toilet observations, and the party aforesaid failed to appreciate the evident kindness of his adviser.

Dr. Leslie, of Okmulgee, graduate of the Denver Homeopathic Medical College, was married to Miss Blossom McKeague, of Leadville, Colo., the 16th of June. The Critique congratulates the doctor.

* * *

The Critique was two days late in its issue last month. That is one thing upon which it prides itself: prompt issue every month so our readers may receive their journal on the date printed on the title page.

* * *

Dr. John L. Moffat, 1136 Dean street, Brooklyn, N. Y., will be at 476 Main street, Orange, N. J., from August 1st to September 7, 1909. All patients are referred to Dr Charles E. Paine, 653 St. Marks avenue, near Nostrand.

* * *

A famous author once referred to members of the female sex as being a "rag, a bone and a hank of hair" and in order to get even one of the same says that a man is a "jag, a drone and a tank of air." Duck, there is more coming.

* * *

Remember the annual assembly of homeopaths for the state of Colorado is an event scheduled for the month of September. Pay your dues and present a paper, both, mind you; in which case you will be considered a good fellow.

* * *

Dr. G. J. Jones has been a teacher in the Cleveland Hómeopathic Medical College continuously since 1872. That is a record of which any man might well be proud, and the college and alumnus should be equally proud of the man himself.

* * *

Dr. J. S. Sidley, of Denver, was married to Miss Mabel Horlick, of Racine, Wis., the forepart of last month. Everyone recognizes the reliability of the Horlick production and the young lady in question, no doubt, is no exception to the rule.

* * *

Harriman, the heavyweight railroad man of this country, was unable to get proper medical care in this country so pulled his freight for the Fatherland. It was here that a wise headed old doctor man advised Ed. to drink beer. Oh, what a punishment.

* * *

The Hering Medical College, of Chicago, has conferred the honorary degree of Doctor of Medicine on E. P. Anshutz, editor of the Homeopathic Envoy. The Homeopathic Society of France elected him to be corresponding member of that society, and the American Institute of Homeopathy conferred the honor of associate member of that

body at the recent meeting in Detroit. These great homeopathic honors are highly appreciated by the recipient.—**Homeopathic Envoy.**

* * *

Dr. George Royal, of Des Moines, Iowa, was elected president of the Alumni Association of the New York Homeopathic Medical College at the meeting held at the Waldorf-Astoria, May 13, 1909. He was a member of the '82 class of that institution.

* * *

Don't forget that the next meeting of the American Institute of Homeopathy will be held in Los Angeles, Calif., July 11 to 16, 1910. We are going to keep this line standing, if the date is correct, until the meeting takes place, "so the people may know."

* * *

Dr. Albert F. Swan, accompanied by his family, left Denver the 14th of last month for Leadville where he took up his duties as an employe of the Internal Revenue Department of the government. **The Critique** wishes him much prosperity in his new home.

* * *

During the recent meeting of the N. E. A. in Denver the secular press was prone to portray the plight in which the pedagogues found themselves during their sojourn in our midst in 1895 when it rained every day. That's nothin'; this time it rained twice a day and then some.

* * *

The calendar of the Detroit Homeopathic College, 1909-10 has been received at this office and from its appearance we should judge that this college was one of the numerous **homeopathic** institutions in the country that feels no occasion to eliminate that word from its title in order to secure business.

* * *

Fat bacon is an excellent thing to use in case of nose-bleed, caused by rupture of blood vessels. Insert a wedge in the nostril; it will dam up the deluge; this may be left for forty-eight hours, when healing will have taken place and in removing the "plug" there will be no recurrence of the hemorrhage.

* * *

Dr. J. Wylie Anderson, business manager of **The Critique**, returned to Denver, Sunday, July 18th, accompanied by Mr. F. A. Williams. Numerous "stories" have appeared in the Denver papers regarding the strenuous time the two gentlemen in question experienced during their trip. To show that their vacation was not spent in vain we quote the following from **The News** of July 21st: "With a record of having shot the biggest bear killed in Alaska in five years, Dr. J. W. Anderson and F. A. Williams have returned to Denver from a three months' hunting trip to Uinmak Island, the most easterly of the Aleutian group. The Denver men experienced much bad weather,

however, having but three clear days in six weeks. Rain and fog seriously interferred with their sport."

* * *

Dr. H. Emeline William asks that her copy of *The Critique* be sent to 627 North Main street, Butte, Montana, instead of Fairplay, Alabama, as heretofore. From this we judge she has made a move westward and are glad to recommend the doctor as a thorough homeopath and worthy the confidence and support of the good people of Butte.

* * *

A Denver paper in giving the results of an accidental discharge of a supposedly "unloaded" firearm, said in a recent issue that the ball penetrated the victim's ambulance. Inasmuch as another paper described the location of the wound as being in the abdomen we are inclined to think that the first reporter got his anatomy and the police equipment mixed.

* * *

Billy Sunday the ex-baseball buster but at present engaged in the highly sensational stunt of busting sinful things before pop-eyed Chautauqua congregations, and who held one of his whirlwind seances in Boulder the latter part of last month, is credited with the following highly classical opinion: "Man is a fool—he passes up God like a pay car passes up a hobo."

* * *

Dr. J. W. Light, a prominent homeopathic physician of Kingman, Kansas, was a visitor in Denver for a brief period during the early days of last month. He came overland in his automobile from Hutchinson, Kansas, accompanied by his son and enjoyed the trip immensely. Dr. McCurtain had him in tow a portion of the time. Come again doctor and stay longer.

* * *

In announcing the personnel of the famous Iola drill team from Dayton, Ohio, which gave a number of exhibitions in this city the forepart of last month, it was stated that the members thereof, with the exception of four, all earned bread by the sweat of their brow. It is hardly necessary to state that there were two doctors, a dentist and a lawyer in the group. But what's the joke?

* * *

The Council of Medical Education and Propagandism, through its chairman, Dr. George Royal, made a lengthy report to the A. I. H., of valuable work done among which was the information that "the Missouri College of Homeopathy, St. Louis, suspended work, and the College of Minnesota is in a most unfortunate condition." Neither one of these institutions took down the homeopathic banner, however, and if the same authority had reported upon another institution

with equal directness there is no question but what Denver, at the present writing, would be counted among the "has beens."

* * *

Here is a brief list of the **homeopathic** societies in California: "California State Homeopathic Medical Society," "The Southern California Homeopathic Medical Society," "Alameda County Homeopathic Medical Society," "Los Angeles County Homeopathic Medical Society," "Sacramento Valley Homeopathic Medical Society," and "San Francisco County Homeopathic Medical Society."

* * *

Dr. Pliny Rand Watts, of Sacramento, Calif., died very suddenly in his home city the 1st of June, 1909. He was a graduate of New York Medical College, class 1887; was born at Nelson, N. H., November 4, 1863, and leaves a wife, son, mother, two brothers and a wide circle of close friends who mourn his death. The profession in California are unanimous in their expressions of sympathy and sorrow.

* * *

According to a "personal" item in **Hahnemannian Monthly**, G Harlan Wells, one of its editors, took special work on clinical medicine and diagnosis with Dr. Richard C. Cabot, at the Harvard University School, during the latter part of June and forepart of July. Of course Dr. Cabot took particular pains to teach him some new homeopathic therapeutics and other things during his short tarry in that territory.

* * *

As an example of what may be accomplished by prohibition and a sane and safe observation of the "Glorious Fourth" it is to the credit of Louisville, Ky., that during this last national noise anniversary just passed, there was not a single emergency call to either private physicians or the city squad to patch up some over-zealous individual who had succeeded in blowing more or less of him or herself to pieces. Pretty good for a beginning.

* * *

Drs. Luther J. Ingersool and Mary A. Ingersoll have offices and residence at 1018 Clarkson street, Denver, Colorado. The former is one of the pioneer homeopathic practitioners of Colorado and while Dr. Mary A. is a more recent recruit to the ranks **The Critique** is pleased to pay its respects to her with a clear conviction that she will practice and preach the principles as promulgated by the immortal Hahnemann. They both have best wishes of **The Critique**.

* * *

The Critique is in receipt of a communication from Dr. James W. Ward, president-elect of the American Institute of Homeopathy, in which he says that the propagandistic work for California in general and homeopathy in particular, has been started, and, further, that the homeopathic press will be treated well during his

term of office. There is no question in our mind but that the homeopathic press will, in return, give a good account of itself in helping the California meeting along.

* * *

The Critique desires to congratulate **North American Journal of Homeopathy** upon its full, free and comprehensive report of the doings of the American Institute of Homeopathy, which appeared in its July issue. A majority of the magazines will be content to tell the tale in their August issues and we regret that **The Critique** will be compelled to class itself among those doing this dilatory stunt, but we are happy to say that we did not delay thus long in giving information regarding the officers-elect.

* * *

A New Jersey man recently found \$4,867 in a bible left him by his aunt over thirty-five years ago. This only goes to show that the young man's bible training was very poorly managed; one redeeming feature of this however is that if he had been too religiously inclined the money would have been spent long ago. As it is he still has the money and the memory of the maiden lady referred to is somewhat "greener" as a result of the finding at this late date of the long green. The man, too, still has his bible.

* * *

Frontispiece of **The Chironian** contains the countenances of the "Class of 1909" of the New York Homeopathic Medical College, or, rather, a halftone reproduction of the same. There are twenty in the bunch and they are as fine a looking lot of youngsters as ever any college sent out to do battle for homeopathy and humanity. That the "old New York" is recovering her high standing among medical colleges, under Dean Copeland's control, needs no better proof than the appearance of the class so recently graduated. Success to the class of '09 and its **alma mater**.

* * *

I want to be a Fletcherite
And chew my food all day.
I want to put my stomach right
And masticate baled hay.
I want to vibrate green and blue,
With yellow wheels to guide,
While friendly germs roam through my new
Harmonious inside.

Tom Masson.

* * *

When one reads an article from the pen of Dr. J. C. Holloway, of Galesburg, Illinois, they are invariably impressed with the idea that there is at least one man in the business who **understands** homeopathic prescribing. We are pleased to present another very able article from this gentleman's pen in this issue and believe we can promise many more in the future. We would like to make this a publication devoted exclusively to homeopathy and homeopathic do-

ings. Help out a little; there is a lot of good material going to waste merely from lack of opportunity to present it.

* * *

Dr. George H. Stover of Denver, who is now in Philadelphia may lose the first finger on his right hand as a result of X-ray experiments. Dr. Stover since the discovery of the X-ray has been one of its most enthusiastic advocates and was one of the first physicians in Denver to use it. As the result of long exposure of his hands to the brilliant white light, it is feared that his fore finger has become so infected as to produce blood poisoning. It was to consult specialists and have an operation performed if necessary that Dr. Stover went to Philadelphia.—**Daily Paper.**

If the doctor gets a dose of this sort in his scientific research, what might the dear people expect?

* * *

We are once again reminded of the loyalty to homeopathy of the Pacific coast contingent, the same being in the shape of the twenty-eighth annual announcement of the Hahnemann Medical College of the Pacific. The document itself besides being one of the finest specimens of the printers' art, sets forth facts regarding this institution quite calculated to make the average seeker after such knowledge, sit up and observe the scenery. With the election of Dr. Ward, dean of the college, to the presidency of the American Institute of Homeopathy and the meeting of that association in California in 1910, homeopathy should have such a boom in the Golden Gate country as will redound to the credit and benefit of homeopathy in general as well as to the Hahnemann Medical College of the Pacific in particular. **The Critique** takes its hat off to this institution and wishes it continued and abundant prosperity.

* * *

"The Board of Directors of the Denver College of Physicians and Surgeons take great pleasure in announcing to the public and to the many friends of this institution that, for the coming year, they have added very materially to the strength and efficiency of the Faculty, Laboratories and Clinics. The student may now obtain in this school thorough training both the regular and homeopathic systems of medicine, thus enabling him to more efficiently cope with the many problems which he will afterwards meet in the practice of medicine. The standard of the school has been raised throughout, and it is the intention to graduate students thoroughly qualified as physicians in every sense of the word, a credit and honor to the profession. This, we believe, will merit the prospective medical student's careful consideration."—**From sixteenth annual announcement, College P. & S., Denver.** Will either the A. M. A. or the A. I. H. "parent" this proposition?



READING NOTICES

Of Interest to Everybody

GOOD RESULTS IN STUBBORN CASES.—Every physician knows full well the advantages to be derived from the use of antikamnia in very many diseases, but a number of them are still lacking a knowledge of the fact that antikamnia in combination with various remedies has a peculiarly happy effect. Particularly is this the case when combined with salol. Salol is a most valuable remedy in many affections and its usefulness seems to be enhanced by combining it with antikamnia. The rheumatoid conditions so often seen in various manifestations are wonderfully relieved by the use of this combination, and the painful stiffness of the joints which remains after a rheumatic attack are also relieved by "Antikamnia & Salol Tablets" containing $2\frac{1}{2}$ grains each of antikamnia and of salol and the dose of which is one or two every two or three hours. Salol neutralizes the uric acid and clears up the urine. The pain and burning of cystitis is relieved to a marked degree by the administration of these tablets. This remedy is also reliable in the treatment of diarrhoea, entero colitis, dysentery, etc. In dysentery where there are bloody, slimy discharges, with tormina and tenesmus, a good dose of sulphate of magnesia, followed by two antikamnia and salol tablets every three hours will give results that are gratifying.

RICHIE'S HUMAN PHYSIOLOGY.—In calling attention to the excellence of this little work upon an intensely interesting subject, that is if it is presented in such a way as to hold the attention of the student, no more appropriate review could be applied thereto than the comments of Henry F. Lewis, M. D., of Chicago, who says: "I wish to commend 'Human Physiology' as the most rational and sane book on that subject that has come to my knowledge. I have long been opposed to teaching physiology in the schools because of the incorrect and untruthful matter in the usual textbooks; especially misleading are the statements in such books about the effects of tobacco and alcohol. This book tells nothing more than the truth in regard to such drugs, but that ought to be enough to satisfy anybody. The plain facts are sufficiently striking for the real temperance cause without any artificial colorings. These statements will appeal to rational teachers and to the good sense of the pupils themselves. I admire the comparative physiology in this book. It is very proper to teach the young that their bodies and minds differ only in degree and not in kind from those of the rest of creation. The book gives the cell idea in words which will be understood by any pupil old enough to be allowed to study physiology at all. The teaching in regard to diseases is in accord with modern thought and practice."

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XVI

ORIGINAL ARTICLE

No.
9

Denver, Colorado, September 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

FIVE PIGMIES.

BY R. del Mas, Ph. D., M. D.

PLANTAGO MAJOR likes grass plots, lawns, fields and roadside, and can live in America as well as in Europe. In ancient times he was much used and esteemed in the healing art, as he seemed to understand how to check a flux, be it from the lungs or the bowels, as well as to stimulate the excretion of the urine. But, as the healing art grew older, Plantago was discarded from the internal household of Galen and given only the care of the skin in sores, ulcers and discharges from scrofulous tumors. He seems to know how to take care of a wound, although externally he is bitter to the taste, for he is sweetish further in, and capable of affecting intermittents and rhus poisoning.

He is quite sensitive, nervous and restless, generally aggravated when sitting still, and ameliorated when moving about, making one think of causticum and silica. He is sad, morose, subject to neuralgic pains, which come on suddenly and are stitching and wandering in character. He wakes frequently from dreams.

He is classified as a left-sided patient in that his pains have a tendency to take the left side only. So we notice his sharp pains occurring frequently and mostly in the left side of the head and in the left ear, in the left teeth, and generally aggravated by cold air or great heat and ameliorated by pressure and lying down. Still, the relief pressure affords him, appears to be transient only. His toothache is ameliorated only on lying down and while eating. Touch and warm things aggravate it. It may be caused by anything. The cheek often swells, yet no decayed teeth may account for it, and saliva runs from the mouth. The prosopalgia sends its stitching into the left ear, whose acuteness of hearing is then intensified, and painfulness much increased by

noise. On mentioning the name of *Plantago*, we must associate it with neuralgia and frequent micturition of profuse, colorless urine; something like *lac defloratum*. In his earache associated with toothache, he nearly competes with *rhododendron*, whose urine is also pale and copious constantly. *Plantago* will lose his urine in sleep, especially so after midnight. His urine leaves a white sediment. He must have the seed of tuberculosis within.

If he tries to busy himself mentally, his anxiety, mental prostration and respiration are increased. His intellect is dull, stupefied, and his temper irritable, like his sensory filaments. He raises pimples and vesicles on the wrists, hands and thighs.

The chill of *Plantago* is one which crude quinine could not suppress. It happens at 2:00 p. m. with rigors. Thirst begins with the heat, which is accompanied by anxious, oppressed breathing (*ipicauanha*), and a desire for cold air (*apis*). During the sweat, the heat of the room is also intolerable. Arsenie has also a 2:00 p. m. chill with restlessness and great thirst during heat. He also has many other things which do not belong to *Plantago*.

Stillingia Sylvatica is also known as the "Queen's delight." Like *Viola Odorata*, she is very humble. Her home is seen in pine-barrens from Virginia to Florida. She is slow in thinking, of very sad mien. Her troubles take a decided aggravation in the afternoon. In the night and damp weather her syphilitic bones ache. Externally, she complains of burning, smarting pains, and also of stitching pains running downward. She pulsates all over; her pulse is irregular. In her channels course syphilis.

She is very apt to have the grippe or a coryza with a watery, acrid discharge from the nose, a dry hacking cough excited by smarting and tickling in the inflamed larynx. The cough is short, exhausting, paroxysmal, worse towards evening and in bed. The tickling may extend into the trachea. The air passages feel tight. With the catarrh, we notice pains in the bones of the face. At that time, bone pains, revealing inherited or acquired syphilis, may be present, particularly below the elbows and knees, with an aggravation in damp weather and during the night (*phytolacca*). The pains are stitching and extend downward; that is their trademark. "Queen's delight" is not a stranger to "King mercurius." All syphilitics are dull, the reverse of the psories.

Teuerium Marum bears the sobriquet of "Cat Thyme," and is a native of Southern Europe. He is a bracing little fellow, whose spunk could stimulate the appetite; but he is very nervous; his female relatives tend to hysteria and amenorrhœa. His children have pertussis and ascarides. He personally complains much of his nose. His blood relations have not contradicted him yet on this point. This organ of sense is obstructed in the evening (puls.); and, when he retires, the nostril of the side lain on gets stopped. Everybody in the vicinity, especially his wife, laughs about that peculiar obstruction. None of them except *Chininum arsenicosum*, heard about it before, that is, in an experimental way. When he is not in bed, he feels it mostly in the right nostril. His nose feels dry inside, and he is compelled to blow it, but no discharge comes (kali-bi., sticta p.). It is very embarrassing. This peculiar nasal feature might be the cause of his great nightly restlessness; his children do not sleep soundly either; the ascarides gnaw at their recti constantly in bed; and they scratch themselves as much as *calcarea* and *sabadilla*, but to no avail; the worms crawl incessantly about the orifice; one can easily see their pointed needles at work after stool; and the tormented children are greatly sensitive, easily irritated. They pass much hot flatus, quite offensive and loud. The formication they feel in the rectum is also present at the root of the nose; and they rub their noses or bore their fingers into them, very much like *cina*. The crawling into the nose is more pronounced in the right side, and might as well, as it were, be associated with catarrh. The appetite of *Teuerium* is increased to the point that it prevents sleep (phos., san.). His stomach is "gone." If he receives a blow in the pit of it, or has eaten a meal, hiccough overtakes him in no small degree. He regurgitates his food bitter. He may walk in his sleep. In spite of himself, he will sing, involuntarily. He is sycotic, with a dry, scaly, itchy skin, that is, he is syco-psoric. He rarely perspires. But, to do Mr. *Teuerium* complete justice, we must confess that it often occurs that he is compelled to blow his nose, not merely from dryness or thickening of the Schneiderian lining, but because he feels as though a large body were lodged in the organ. In fact, he naturally raises polypi in his posterior nares;

hence this crawling feeling there. But, before the polypus forms, we have catarrh, and this sensation is then felt also. His sense of smell is quite diminished, if not wanting entirely, and ozoena often is his share of human infirmities. Scabs form inside his nostrils and are coupled with a greenish, offensive, thick discharge. If this be really true, he must have inherited syphilis. The sense of obstruction, real or false, the formication at the root, the necessity of frequently blowing a dry nose, that gets stopped on the side lain on, seems to be the chief characteristics of the nasal troubles of Teucrium, together with a right-sided preference. The urine of the Teucrium children is as clear as water, while that of Cina is milky on standing. Talk to Teucrium of unpleasant things, and you aggravate him all over (cal. c.). He is as anxious bodily as Arsenicum mentally. His loss of smell derives from sycosis; also his bodily anxiety.

Uva Ursi, literally known as the "Grape of the Bear," is a specialist in some urinary disturbances, particularly in catarrh of the bladder with a bloody muco-purulent sediment in the urine. His clients urinate frequently. Their urging to urinate is painful, their urination also; during the passage of the urine, the urethra burns intensely. This merely conveys the idea that their urine is hot, burning. In chronic Bright's disease and menorrhagia, *Uva Ursi* claims to have done some good.

Viola Tricolor, which is so familiar to everybody under the modest name of "Pansy," frequently adorns our gardens with honor. She is a beauty, to the sight at least; and her soul emits a delicioius scent. But, withal, she is an absent-minded and anxious beauty, like her cousin *Viola odorata*. Her anxiety increases after eating. Her enemies tax her of abusiveness (*nux. sepia*). She shrinks from the open air, and still she desires it and is ameliorated by it. In other words, the open air is gratifying to her, but not to her skin, because she is syphilo-psoric. She is not really quarrelsome, but the surroundings may cause her to imitate Chamomilla, for she is quite irritable, although of a quiet disposition. Her memory is poor. She is not so excitable as her cousin mentioned above. *Viola odorata* is very hysterical. Although *Viola tricolor* is forgetful, ideas tramp upon her mind in abundance (*coffea, opium*); this speaks of psora. She is hurried in

her movements, impatient; that reveals sycosis. Sitting is a punishment for her, as much as standing is for Sulphur. Her symptoms are mostly left-sided (lach.), and extend crosswise, left upper and right lower. Her complaints are aggravated on rising up, but walking ameliorates them, and so does rubbing. She is apt to be as sick in the night as in the day, easily displeased and discouraged. She is a highly nervous body, naturally born so or not. Highly sensitive people require a great deal of philosophy to brush aside all the asperities of life. *Viola tricolor* is sad, tearful, averse to mental work and indifferent; averse to talking. She is suspicious. This intensifies her sensitiveness. Should pressure be applied on the painless side, he would be aggravated (bry., ign., puls.). She cannot lie down without discomfort when she is sick; she wants to move; if she does lie down, she will rest on the painful side. She may have reached this general hyperesthesia after taking mercury in one form or another. She feels tired, a sense of malaise all over, and she walks it off. She has no fancy for the winter. Her external parts formicate, her muscles cramp up, she feels tight, constricted externally; she itches all over; her pulse is irregular; she breaks out in burning, itching eruptions, more so over the face and head; and the warmth of the bed aggravates the itching. Scabs form upon the affected parts, they crack and discharge a yellow, purulent fluid. Eczema of the scalp with matting of the hair and swollen cervical glands, crusta lactea with unbearable burning and itching, and the yellowish crust and pus, with the nightly aggravation. Ichorous ulcers with great itching. *Tinea favosa* with the burning, and pus or crusts already mentioned. *Impetigo contagiosa*. All this is hers. These moist eruptions speak of latent syphilis.

It is patent that our beloved pansy is serofulous; that is, she has inherited syphilis and psora. She might develop pulmonary phthisis, if circumstances would permit. It seems that her mental and nervous symptoms are syphilitic or mercurial, but the suppression of discharges (skin) has also a great deal to do with it. We find no external sycosis in her, no warts of any kind, no nasal troubles worth noting. Of syphilis we have her skin aggravation in the night and the open air. Her salt rheum speaks of

psora. Her amelioration from motion and rubbing denotes syco-sis.

Our pansy has a red strand that runs markedly through all that which precedes, and she dared not confess it; but some of her friends were indiscreet enough to reveal it; that is, *her urine smells like that of cats*. Now she is satisfied, since she is sure that little Asparagus and Miss Viburnum opulus have the same infirmity. She urinates frequently and copiously, and wets her bed also in the night. Her desire for urination is urging, at times with tenesmus, and also stitching in the urethra when not urinating. Stitches are general with her. Some claim, with reason, the bed-wetters are tubercular.

Her genitals may be covered with painful eruptions. Her pains, whether internal or external, are stitching and in a downward direction. She feels them in the bones, mostly in the muscles. It is a tearing stitch or jerk that drives her to motion. She often complains of pressing pains, but these pains partake of the general constructive feeling, and are directed either inward or outward. In all of her sufferings, she lies on the painful side or walks. A jar, on stepping, aggravates her (*rhus.*), and ameliorates capsicum. She feels stitching pains through the limbs and points.

Her skin is usually dry, itching, stinging, and burning (a psoric sign), with a crawling sensation. She is quite known for her amorous dreams, rivaling with Mrs. Lachesis or Mrs. Natrum Carb. When her dreams are not amorous, they are pleasant and vivid. Such dreams and stitches or jerks through the limbs associated with skin affections, make her sleep restless. She falls asleep late and lies with her head thrown backwards. If she can scratch her tingling, stinging parts, she feels relieved (reverse of *rhus.* and *sulph.*), although the parts will stick or glue together, if they discharge moist, for she is quite familiar with dry eruptions also. She is a rheumatic, gouty subject, worse from cold, and lying and sitting. The lithic diathesis is prominently sycotic with a psoric blending. She has it.

The stitches go through her head, as well as through any other dependency of her domain, and are freakish in that they are relieved on stooping (*ign.*) and felt after stooping. She also

complains of an outward pressure, as if the brain were forced out of the skull. As stated already she is subject to scurfy (*tinea favosa*) and moist (*eczema*) eruptions on the head.

What characterizes *Viola odorata* appears to be: her sensitiveness to cold and surroundings; her anxiety and restlessness; her hurry and impatience; her amelioration from motion and pressure; her stitching and pressing pains; her dry and moist eruptions; her nightly aggravation from lying and the warmth of the bed; her dry, burning, itching skin; and her urine smelling like that of cats. *Plantago* grows very restless, and the pains of *Viola* are aggravated, from sitting. *Viola tricolor* has inherited the three miasms. Her mental restlessness belongs to psora, her physical relief from motion is sycotic.

Centerville, Minn.

SECTIONAL ADDRESS, BUREAU OF MATERIA MEDICA, AMERICAN INSTITUTE OF HOMEOPATHY, DETROIT, 1909.

By Lewis Pinkerton Crutcher, M. D., Chairman.

IT IS NOT the purpose of your chairman to detain you with an array of medical platitudes, but rather if possible, briefly to call your attention to some of the deductions that are born of a year's active experience in the chairmanship of this most important bureau. In the first place (and without regard for the contributions that have been or may be made to this bureau), it would be pertinent to recommend that in the future this centric body of our National Society be kept as free as possible from the vagaries of the ultra-enthusiast, whether he bear the stigma of "Mongrel" or whether he dignify himself with the title of "Hahnemannian."

By this expression the thought would be conveyed to you that this bureau cannot afford a very extensive toleration of the practitioner whose feigned liberality justifies him in the mixture, not only of drugs, but of therapeutic principles as well, nor on the other hand can it long endure the vaporings of the extremist who would potentize sunbeams and recommend it for Photoph-

bia or who would occupy the time allotted to others in a tiresome narration of what he imagines the potentized smiles of a female Hottentot would do to or for a fellow suffering acute melancholia.

Let the former offender seek comfortable quarter in the "liberal" bureau of Clinical Medicine, and the latter; may his jargon be tenderly sifted into some Medico-religious cult where smiling and lying are worth full one hundred cents on the dollar.

Another recommendation presented for your esteemed consideration is that those sacrificial members of the profession who give of their time and talents in the furtherance of scientific provings of remedies should as far as possible, abridge their findings when read before this body in order that our deliberations may not be marred by too much of detail, giving, let us say, only the most striking, practical features of the proving, depending upon the official journal for the presentation of the general symptomatology of the remedy.

The *Materia Medica* principle that has been handed down to us "to have and to hold" has brought with it a grave responsibility since upon our fidelity to it, there rests the perpetuity of a great system of therapeutics whose successful application must ever depend upon a scientific armamentarium.

This loyalty must be manifest, not only in this body, but in the all of the chairs of our colleges, in our practice and in those of our preachers that find their way into print.

The program of this bureau for this year speaks for itself, and yet a hearty word of appreciation is due the several essayists, most of whose contributions were voluntary, and a personal expression of gratitude is extended to Dr. J. W. Mastin for his able assistance and to the profession at large for its encouragement and sympathy.

Editorial Note:—The foregoing is Chairman Crutcher's sectional address which he did not deliver at the sixty-fifth annual session of the American Institute of Homeopathy, held at Detroit last June. The capable chairman intended to get this out of his system extemore, but on more mature deliberation decided that readers of *The Critique* were entitled to better consideration at his hands, hence this publicity. "They say," comments the doctor, "we pulled off the finest *materia medica* bureau the A. I. H. has had for years which is of course no

surprise to us." I am pleased to learn of the complete recovery of Mrs. Crutcher; a sojourn in the Ozark mountains resulted in a very decided benefit to Mrs. C. from a physical standpoint, while the doctor acknowledges to a highly spiritual uplift through the same benign influence. Praises be!

"INTESTINAL AUTO-INTOXICATION: ITS TREATMENT BY IRRIGATION."

By Wm. L. Dickinson, M. D.

DURING NORMAL DIGESTION, there are present in the intestine peptones, crystalline bodies, aromatic substances and ptomaines, which are toxic, but changed into less toxic bodies and eliminated by the stools. Whenever their number is very great, relief is obtained by a profuse intercurrent diarrhea, while the remaining toxic bodies, having been acted upon partially by the digestive mucosa, are changed in the liver, then enter the circulation, and being further changed by the antitoxic glands, finally are eliminated through the skin, kidneys and lungs.

Many patients have suffered for years, and perhaps the greater part of their lives, from constipation, and the condition has been aggravated as they have grown older and more sedentary in their habits.

There are well-marked symptoms in the auto-intoxicated. Among the prominent are: a drawn expression; sunken eyes; frequently the so-called liver spots; often the patient is pot-bellied and the skin is dry and harsh; it is quite common to have the bowels greatly distended by gases, shortly after meals, necessitating the loosening of the clothing; the breath is frequently very offensive; the odor of the stools is sickening, while the stools are constipated, hard, lumpy, and of small caliber or semi-liquid or mushy, and upon examination mucus and membranes are found. Patients are often unable to concentrate their thoughts, and there is loss of memory. There is great fatigue, and depression of spirits. Pruritus, urticaria, eczema or furnunculosis caused by intestinal auto-intoxication may be present.

These are not all the symptoms that may arise from intestinal auto-intoxication, but they are sufficient to emphasize the importance of the subject, and the necessity of having the intestinal discharges examined by a competent person before and during the treatment of the patient. An examination of the urine to determine the amount of indican present in cases of intestinal auto-intoxication can be made by any physician, but there are times when a laboratory examination must be made by an expert.

The treatment must of necessity begin with careful attention to the kind and amount of food taken. Vegetables should largely replace meats, and in fact the patient will gain faster if meat is not partaken of at all. There should be a liberal use of water internally—drinking between meals two or three quarts of water daily.

The treatment is not simple and is one that requires attention and generally a long time. The routine method is the administration of calomel gr. 1/10 and podophyllin gr. 1/24 repeated every hour for eight or ten doses, followed with rochelle salt one-half ounce in six ounces of hot water every two hours until the stools are watery. The colon should be distended with warm water containing half an ounce of soda sulphate to the quart. The patient should be in the knee-chest position. The water should flow slowly, fully distending the bowels, but not causing pain. This washing out of the bowel should be done daily for about one week and the urine should be examined again for indican, and if it is found present, the indication is that there is need of another course of the calomel and podophyllin. The bowel should be made aseptic by the use of sulphocarbolate of zinc gr. x to one quart of water used by enemata retaining as much of it as possible.

The treatment is to keep the intestine as clean as possible.
Saginaw, Mich.

"ABDOMINAL MASSAGE IN THE TREATMENT OF CHRONIC CONSTIPATION, ETC."**BY T. L. HAZZARD, M. D., B. S.**

THE WRITER referred to the fact that general massage had been practiced from very ancient times until the present for the relief of fatigue and for the purpose of increasing the flow of fluids in the blood vessels, the lymph spaces and juice canals, by which more perfect elimination of waste is obtained and better assimilation brought about. Two conditions which, in his opinion the relief of will do away with two-thirds of the slight ailments as well as of some of the more serious ones. He began massage for the relief of chronic constipation, and was much surprised to find the far-reaching, adventitious effects produced. Among others, for example, that the chalky deposit in the joints in articular rheumatism, under careful, patient, persistent manual therapeutics as applied to the bowels, will entirely disappear more often than not.

Mentioned no particular method, saying that any good text book would give the technic sufficiently well. This manipulation is recommended not only for chronic constipation, but also for the relief of coprostasis for which operation it is very frequently done.

After indicating more of the benefits and some of the dangers of the method, the writer said that if this treatment called for more time than the physician or surgeon could spare, it had better be left off altogether, although the patient would surely lose a very great benefit. The paper closed with the remark that doubters as to the very great advantages which will accrue to the sick, in many, many ailments, has but to practice careful and intelligent massage to be convinced.

Pittsburg, Pa.

SPECIAL ARTICLE

THE NECESSARY REQUISITES FOR A GOOD PRESCRIPTION.*

By J. M. S. Cheshire, M. D.

MISTER CHAIRMAN, LADIES AND GENTLEMEN:—In compliance with the request of the chairman of this bureau I have endeavored to give the necessary requisites for a good prescription, and the only apology I can offer for the statements made herein is that I am a Homeopath from the extremities of my big ears to the soles of my silicia feet.

The first necessary requisite for a good prescription is a thorough knowledge of the organon, and particularly of paragraphs 83 to 99 inclusive. In these paragraphs Hahnemann gives directions for examining every case, which if closely followed gives us—as the boy said when he placed a pin in a chair—a good starting point.

In paragraph 83 we are reminded that a physician should be free from prejudice. This is one of the greatest obstacles that we as Homeopaths have to surmount. Prejudice exists everywhere. It crops out in the examination of a patient. Each of us have our ideas as to what constitutes the right methods of examination, and patients are not examined for the purpose of bringing out the truth, the whole truth, and nothing but the truth.

Prejudice leads the physician to snap the patient up as soon as he begins to relate his symptoms. The patient is palpated, percussed,—possibly cussed also,—and auscultated and is told what is the trouble.

A prescription based upon the diagnosis and the pathological findings, which has no relation to the constitutional state; is the result of such an examination. When our prescriptions are

*Read before the Kansas State Homeopathic Association at Topeka May 11, 1909.

influenced by diagnosis or pathological findings we are not free from prejudice and hence are not homeopathic. An unprejudiced mind can only come from sound understanding, and sound understanding comes from education. This education is an education in Homeopathy, becoming acquainted with all the doctrines step by step. We should go into a case without forming any judgment until all the symptoms and history have been collated, then we can study the whole case.

No physician can become a good prescriber until he has mastered the art of case taking. You may get symptoms innumerable and yet have nothing on which to base a prescription. If you leave out of your record that which characterizes your patient, you have nothing on which to prescribe and should not expect anything but indifferent success. It is the peculiar and characteristic symptoms which characterize a case. That which makes you hesitate and think. In an eruptive disease you would expect to find a rash or eruption, but if the rash or eruption is absent, it is something out of the ordinary and is therefore a characteristic. You expect thirst during fever, but what would you think if thirst is conspicuous by its absence? That would be a peculiar condition and should be one of the guiding symptoms. So it is the absence of pathognomonic symptoms that characterize the patient. Symptoms are the language of Nature and should form the basis of our study of sicknesses. We should not overlook pathology and physical diagnosis, but these are of secondary importance.

A Homeopathic prescription cannot be made on pathology or morbid anatomy because provings have never been pushed in that direction.

A well taken case is half the battle and makes the rest of our work comparatively easy. The next important step is the synopsis of the case for study and here is where a knowledge of the divisions and grades of symptoms is of vital importance.

Symptoms are divided into general, particular and common. General symptoms are such as are predicated of the patient, e. g., "I am chilly; I am thirsty; I have so much burning; I feel worse in the morning; I am worse in cold weather," etc.

Particular symptoms are those that are confined to a single part or organ, e. g., "My feet are cold; my hands burn; my stomach aches; my throat is sore; the light hurts my eyes," etc.

Common symptoms are those that you would expect to find in any disease, or those that go to make up a diagnosis. In the study of a case the generals should always take precedence, and no matter if a number of particular symptoms should contra indicate a remedy, if it is indicated by the generals it should be considered. If all the particulars should indicate arsenicum and the patient is aggravated by heat, arsenicum would do the patient no good, no matter what potency is given.

The next important qualification is familiarity with the repertory. This consists of knowing where to find the various symptoms or rubries and translating the symptoms of the patient to the language of the repertory. The more the repertory is used, the easier it is to use it and the better results will be obtained.

Given a well taken case, proper synopsis for study and knowledge of the repertory, a good prescription is bound to follow.

In closing, let me urge you to acquire a comprehensive knowledge of the Organon. Let it be your therapeutic guide and daily companion; read it, study it; master its precepts and principles and Samuel Hahnemann will not be ashamed to recognize you as one of his disciples.

Peabody, Kans.



S E L E C T E D

A PLATFORM FOR THE MEDICAL PROFESSION.

THE MEDICAL PROFESSION IN AMERICA, outside of a comparatively few specialists, seems to be passing through a period of economic stress. It is harder now to derive a satisfactory income from the practice of medicine, and to lay up an odd dollar or two, than it has been for many years past; and in spite of diminishing income the cost of living increases almost daily.

A number of things have contributed to affect the doctor's income. Bacteriology has taught us the cause and suggested the means for prevention of a number of diseases and bacterial vaccines and sera of various kinds tend to lessen the duration of treatment. The medical profession as a whole has had to suffer from the nihilistic attitude of a majority toward drug therapy, a minority which has attracted public attention because of the reputation of many of its members, although the reputation was gained in other fields than therapeutics. The public has not learned to attach due weight to the therapeutic ideas of Doctor Jones, the eminent pathologist or of Doctor Smith, the well-known authority on diagnosis. The daring advances and remarkable triumphs of surgery have thrown a glamour over the surgeon and have tended to belittle the medical practician among many people, while the readiness of the doctor to play second fiddle to the surgeon has caused many who "fear the knife" to seek counsel and advice regarding their ailments outside the medical profession. The financial stringency and business depression of the past two years have driven many people away from the family doctor, whose bills they could no longer afford to pay, to the patent medicine counter of the drug store or the free hospital or dispensary.

Coincident with all of the above, there has gone on a recrudescence of an old philosophy under various guises and exhibit-

ing numerous varieties. This movement has been aided and abetted by the ultra-materialistic attitude of thought and expression of the modern physician, by a general revolt against dogma, and orthodox theology, and, we are tempted to think, by the women's club movement, which has been responsible for the acquirement of much shallow learning. Many women seem to think it an evidence of intellectual culture to be able to prate learnedly in abstruse terms, of the real meaning of which they have no cognizance.

This tendency on the part of the laity to run after "a new thing" has pointed the way for the development of new cults, some more or less allied to the science of medicine, as for example, osteopathy and chiropractics, others totally opposed to it as seen in the naturopath and the faith healer.

A recent writer has been at some pains to collect data upon which he can base an estimate of the number of people who have drifted away from the doctor of medicine to the various forms of "drugless healing." In these are included suggestive therapeutics, magnetic healing, christian science, mental science, osteopathy, naturopathy, physical culture, refraction and optics, faith healing, food scientists and Emmanuel healing. The aggregate number of practitioners deriving a more or less satisfactory living from these unorthodox, and, in many cases, illegal types of the healing art is estimated at 28,300; and to their revenue contribute, so it is said, 17,600,000 followers. Roughly, there are 620 followers to every irregular practitioner, and if the balance of the population of the country is divided up among licensed practitioners, graduates of medical colleges, there would be about 590 to each physician. But numbers would not be the real test in this instance, for in the clientele allotted to the physician are quite a large number of people who are too poor to pay bills, or are deadheads, while the practitioners of the various cults enumerated above have succeeded in attracting to themselves more than their share of people with long purses. In ten years time, if their adherents increase as rapidly as they have in the past decade, and the present rate of increase among the medical profession is maintained, the doctor will have to support himself on the business from about 200 individuals.

It would seem, then, that the medical profession faces an economic crisis.

What is to be done about it? Shall we go before our legislatures and seek to have the irregulars legislated out of existence? It is a futile task; and just as the homeopaths and eclectics grew in numbers and flourished under the oppression of the dominant school, so will the "persecution" of the osteopath, christian scientist, etc., react upon the whole medical profession. If we are to retain the confidence of the laity we must prove ourselves worthy of it by harmony amongst ourselves and by diligence in study to increase our competence to treat the sick. We must have faith in our therapeutics.

Dr. E. G. Jones, whose estimates we have drawn upon above, suggests the following platform as one on which we can present a solid front to the world:

"Whereas, We believe it to be the business of the doctor to heal the sick;

"Therefore, We hold the following propositions to be self-evident:

1. That it is the duty of the physician to use every means in his power to cure his patients.

2. That a therapeutic fact is of value to us, no matter from what source it may come.

3. That we are opposed to useless surgery, believing it to be the duty of the physician to give his patients the best medical treatment that skill and experience can give them, and to only use surgery when necessary.

4. That we love and honor our Alma Mater and have perfect confidence in its faculty to judge of our qualifications to practice as an M. D. Therefore we insist upon our diploma being the passport for us to practice our profession anywhere under the American flag.

5. We are not afraid of competition with our brother physicians. and we do not ask to be protected by mediacl laws which prevent graduate physicians from practicing.

6. We welcome to our ranks any reputable physician, no matter what his system of therapeutics may be.

7. We claim the constitutional right of every American citizen to use any remedies that may help us to heal the sick. We are op-

posed to any man or society of men dictating to us what remedies we shall use or what medical journals we shall read.

8. We are aware of the fact that much harm has been done in belittling the study of *materia medica* and teaching the uncertainty (thereof), thus making medical nihilists of so many of our profession. Therefore, we earnestly advocate the diligent study of the action of our remedies, in health and disease, that we may all the sooner form a definite system of therapeutics, containing remedies that have a positive remedial action upon certain diseased tissues."

The above platform is a curious mixture of advanced and retrograde ideas. Plank or proposition 3 is not well stated, although the idea in the mind of the writer is evident, and the lesson is to be taken to heart. As to proposition 4, the medical profession is not yet prepared to undo the work of the last fifteen or twenty years in the upbuilding of an educated profession; but it is true that the very laws intended for our protection, or at least, for the protection of the public, have proved shackles upon ourselves; and there is an urgent cry for modifications which shall set no local bounds on the practice of the profession, on the one hand, and which shall bring into the profession men capable of healing the sick, on the other hand.

While the adoption of some such platform as the above may be productive of good, more than organized reform is necessary. The success attained by individual members of the profession shows what can be done; and the individual doctor must stand or fall by his own results. In the parlance of the day, the people are "from Missouri" and the doctor must "deliver the goods." Unfortunately, this warning needs to be heeded among the followers of Hahnemann. There is too much surgery, too much specialism, too much nihilism, and too little faithful and intelligent prescribing among graduates of the Homeopathic colleges.
—*Editorial, North American Journal of Homeopathy, August, 1909.*

COMMUNICATIONS

TO HOMEOPATHIC PHYSICIANS OF COLORADO.

THE OFFICERS of the Colorado Homeopathic Society are pleased to announce that the twenty-fourth annual meeting of the Society will be held in Denver, on September 7 and 8, 1909.

The sixteenth annual session of the college will open at the college building on the evening of September 6th, 8 p. m.

The officers and faculty extend a cordial invitation to all members of the society to attend.

The first session of the society will be called to order by the president at 10 o'clock the morning of the 7th.

Judging from information at hand we anticipate the largest gathering in the history of the society.

We are enclosing herewith a copy of our program which will convey to you in a small way, some idea of the good things that are in store for all who attend.

Let us urge upon you the importance of laying aside routine affairs for two days, and joining hands with us in making our State Society a more potent factor in the promulgation of the truths upon which we stand as a school.

Let us not stand divided, but united in a common cause; there are none so wise but that they may learn. So let us urge of you to meet with us, perhaps the other fellow may be able to tell us the very thing we have been wanting to know.

Those who have gone before us labored long and diligently for the standing that we now command as a school, and you and I should do our share in perpetuating these institutions to their energy and united effort.

Trusting we shall meet you at each and every session, we are,

Cordially and fraternally,

EDWARD A. DARBY, President.

CHARLES M. WORTH, Secretary.

CONVENTION AMERICAN INSTITUTE OF HOMEOPATHY LOS ANGELES, CALIFORNIA, JULY 11-16, 1910.

THE TRANSPORTATION COMMITTEE, through its chairman, Dr. Charles E. Fisher, has called on all the railroads going west from Chicago, and all are anxious to do their best in equipment, time, etc., to take us West.

We have had tentative plans of the trip offering all sorts of schedules, etc. As yet the committee has made no choice of road, and will not do so until a rate is made, but in order to show the members what we have in mind, we present a tentative schedule handed in by one of the roads. This is given solely because it gives all details more fully than some of the others.

MY DEAR SIR:

Referring to our recent conversation in reference to the above meeting to be held in Los Angeles during July, 1910.

I beg to submit herewith itinerary of special train for the accommodation of your delegation. You will note same is so scheduled to accommodate all delegates who will arrive in Chicago during the day, July 6th. It also provides for a five-hour lay-over at Denver and about the same lay-over at Salt Lake City, and is so scheduled to take in the principal scenic points of interest through scenic Colorado.

Schedule as Follows:

Via Chicago, Rock Island & Pacific R. R.

Wednesday,	July 6,	Lv. Chicago	9:15 P.M.
Thursday,	July 7,	Lv. Rock Island	1:20 A.M.
Thursday,	July 7,	Lv. Davenport	1:35 A.M.
Thursday,	July 7,	Lv. Iowa City.....	4:35 A.M.
Thursday,	July 7,	Lv. Des Moines	7:10 A.M.
Thursday,	July 7,	Lv. Omaha	11:30 A.M.
Thursday,	July 7,	Lv. Lincoln	1:35 P.M.
Friday,	July 8,	Ar. Denver	6:30 A.M.

(Stop at Denver from 6:30 a. m. until 11:30 noon.)

Via Denver & Rio Grande Railroad.

Friday,	July 8,	Lv. Denver	11:30 A.M.
Friday,	July 8,	Lv. Colorado Springs	2:00 P.M.
Friday,	July 8,	Lv. Pueblo	3:10 P.M.
Saturday,	July 9,	Ar. Salt Lake City...	4:50 P.M.

(Stop at Salt Lake City from 4:50 p. m. until 9:30 p. m.)

Via San Pedro, Los Angeles & Salt Lake R. R.

Saturday,	July 9,	Lv. Salt Lake City...	9:15 P.M.
Sunday,	July 10,	Ar. Los Angeles	9:00 P.M.

Special train to consist of the highest class modern, up-to-date equipment, to include buffet, library car, dining car for all meals, with sufficient high-class standard Pullman sleepers to

comfortably take care of your party; also to include observation sleeper to be used for special purposes.

You will appreciate that it is a little early at this time to advise what fares will be authorized for the meeting; however, it is safe to say that the fares authorized will be such as to induce a large attendance.

The diverse route privileges authorized on California tourist tickets are such as to give your delegation an opportunity of going one route and returning another. For instance, going through Denver, Scenic Colorado and Utah, direct to Los Angeles via the San Pedro Route, and returning optional, either via San Francisco through Utah and Colorado, or via San Francisco, Portland, Seattle and the Canadian Rockies via St. Paul, or via San Francisco, returning again through Los Angeles and the Grand Canon of Arizona. For those desiring to take in Yellowstone Park at the time of your meeting, tickets may be so routed as to bring them back via Livingston, Mont., or Yellowstone, Mont., for the side trip through the Park.

At a later date when the rates are settled, I will be very glad to quote you further details regarding your special train arrangements, and will issue the necessary itineraries or any other printed matter to circularize among the members of your association, advising them in detail conditions of rates, diverse routes, etc.

There comes to our mind the question whether the profession prefer to remain in Denver so that an excursion can be made over the Moffat Road. If so, now is the time to acquaint the committee with your views.

Does this schedule meet with the approval of the eastern members? If not, now is the time to make your views known. You see we want to go on a special train, and are anxious that you shall enjoy the entertainment on the way out that is being arranged for by the profession of the various cities and the committee.

Does the date of leaving please you or would a day later or a day earlier be better? Remember the committee wants to please all, and are anxious that all go together.

T. E. COSTAIN, Sec. of the Transportation Com.



CORRESPONDENCE



KANSAS NEWS LETTER.

DR. CHESSHIR, of Peabody, Kans., intends to move to Superior, Neb., about the 1st of September.

A movement is on foot to establish a new journal to be known as the *Bi-State Journal of Missouri and Kansas*. The matter comes up for disposal at the next meeting of the Kansas association.

Dr. George Royal, of Des Moines, Ia., attended the meeting of the Kansas State Homeopathic Association and gave some very interesting talks, which were much appreciated. Come again, Doctor.

The Kansas State Homeopathic Association will meet next year at Kansas City. The meeting at Topeka this year was a good one and the attendance fair. Dr. H. C. Aldrich, of Caney, is the new president, and Dr. Clay E. Coburn, of Kansas City, the new secretary. Let us all put our shoulders to the wheel and push for the success of the next meeting. Anyone having clinical cases to report will please notify Doctor Chesshir of Superior, Neb.

CHICAGO LETTER.

DR. S. W. MURPHY, Hahn. '09, has located in Kenosha, Wisconsin.

Hering Medical College has its catalogue out announcing the opening of college this year on September 29th.

Dr. L. C. Wales, Hahn. '08, has located in Peoria, Ill., where he is making a specialty of nose and throat work.

Miss E. M. Kendall, the faithful clerk at Hahnemann College, is enjoying her vacation at her home in Indiana.

Dr. A. W. McDonough, Hahn. '10, has already passed his first two years of the Iowa State Board. Mc. is faster than he looks to be.

Dr. George E. Bartlett, Hahn. '08, has located in Lacey, Ia., after serving one year as interne in the Hahnemann Hospital at Rochester, N. Y.

Dr. E. H. Pratt is spending an extended vacation in the West and will take in the Seattle Exposition before his return to Chicago, about September 1st.

Dr. J. A. Tomhagen, after being off the teaching list of Hering College for some time, has returned to the Hering College faculty, department of clinical medicine.

Dr. Sarah Hackett Stevenson of Chicago died on August 14th. She was one of the oldest women practitioners in the state of Illinois, and well known to the entire profession.

The catalogues of Hahnemann Medical College, season of 1909-10, are now out and announce the beginning of college on September 27, 1909. Send for a catalogue and send your students to Hahnemann.

Following is a schedule of the special autumn course of medical clinics and lectures to be given at Hahnemann Medical College, Chicago, beginning September 7th and ending September 21, 1909:

September 7th: 9-10 a. m., Prof. Kent, Bryonia Alba; 10-11 a. m., Prof. Aurand, Anacardium; 11-12 a. m., Prof. Blackwood, Snake Poisons; 2:30-3:30 p. m., Prof. Dienst, Comparative Materia Medica; 3:30-4:30 p. m., Prof. Halbert, Digitalis and other remedies; 4:30-5:30 p. m., Prof. Fellows, Homeopathic remedies in external diseases of the eye; 8 p. m., Prof. Bailey, Therapeutics of Light.

September 8th: 9-10 a. m., Prof. Kent, Rhus toxocodendron; 10-11 a. m., Prof. Hanks, Therapeutics of Gynecology; 11-12 a. m., Prof. McDonald, Therapeutics of Pneumonia; 2:30-3:30 p. m., Prof. Dienst, Comparative Materia Medica; 3:30-4:30 p. m., Prof. Cowperthwaite, Homeopathic Therapeutics; 4:30-5:30 p. m., Prof. Mitchell, Therapeutics of Renal Diseases; 8 p. m., Prof. Grubbe, Electro-Therapeutics and X-Ray.

September 9th: 9-10 a. m., Prof. Kent, Phosphorus; 10-11 a. m., Prof. Aurand, Antimonium crudum; 11-12 a. m., Prof. Blouke, Homeopathic Treatment in Diseases of Women; 2:30-3:30 p. m., Prof. Blackwood, Tubercular Clinic; 3:30-4:30 p. m., Prof. Blackwood, General Clinic; 4:30-5:30 p. m., Prof. Blackwood.

September 10th: 9-10 a. m., Prof. Kent, Phosphorous Acid; 10-11 a. m., Prof. Hanks, Therapeutics of Gynecology; 11-12 a. m., Prof. Gordon, Therapeutics of Pleuritis; 2:30-3:30, Prof. Cobb, Children's Clinic; 3:30-4:30 p. m., Prof. Cowperthwaite, Homeopathic Therapeutics; 4:30-5:30 p. m., Prof. Bruce, Adjuvants to Medical Treatment.

September 11th: 9-10 a. m., Prof. Kent, Sulphur; 10-11 a. m., Prof. Aurand, Baptisia; 11-12 a. m., Prof. Blackwood, Snake Poisons; 2:30-3:30 p. m., Prof. Dienst, Comparative Materia Medica; 3:30-4:30 p. m., Prof. Cowperthwaite, Homeopathic Therapeutics; 4:30-5:30 p. m., Prof. George, Remedies in Diseases of the Eye.

September 13th: 9-10 a. m., Prof. Kent, Psorinum; 10-11 a. m., Prof. Hanks, Therapeutics of Gynecology; 11-12 a. m., Prof. Wieland, Therapeutics of Genito-Urinary Diseases; 2:30-3:30 p. m., Prof. Halbert, Tubercular Clinic; 3:30-4:30 p. m., General Medical Clinic; 4:30 5:30 p. m., General Medical Clinic.

September 14th: 9-10 a. m., Prof. Kent, Belladonna; 10-11 a. m., Prof. Aurand, Cimicifuga; 11-12 a. m., Prof. Blackwood, Tuberculin; 2:30-3:30 p. m., Prof. Dienst, Comparative Materia Medica; 3:30-4:30 p. m., Prof. Cowperthwaite, Homeopathic Therapeutics; 4:30-5:30 p. m., Prof. Mitchell, Therapeutics of Renal Diseases; 8 p. m., Prof. Bailey, Therapeutics of Light.

September 15th: 9-10 a. m., Prof. Kent, Calcarea Carbonica; 10-11 a. m., Prof. Hanks, Therapeutics of Gynecology; 11-12 a. m., Prof. McDonald, Therapeutics of Typhoid Fevers; 2:30-3:30 p. m., Prof. Cobb, Therapeutics of Chorea and Epilepsy; 3:30-4:30 p. m., Prof. Halbert, Strophanthus and other remedies; 4:30-5:30 p. m., Prof. Fellows, Homeopathic remedies in internal fundus and functional diseases of the eye; 8 p. m., Prof. Grubbe, Electro-Therapeutics and X-Ray.

September 16th: 9-10 a. m., Prof. Kent, Calcarea Phosp.; 10-11 a. m., Prof. Aurand, Chelidonium Majus; 11-12 a. m., Prof. Blouke Homeopathic treatment of diseases of women; 2:30-3:30 p. m., Prof. Blackwood, Tubercular Clinic; 3:30-4:30 p. m., Prof. Blackwood, General Medical Clinic; 4:30-5:30 p. m., Medical Clinic; 8 p. m., Prof. Wilson, The Present Status of Scientific Medicine and Its Relation to Homeopathy.

September 17th: 9-10 a. m., Prof. Kent, Calcarea Arsenicosa; 10-11 a. m., Prof. Clark, Therapeutics of Endometritis; 11-12 a. m., Prof. Blackwood, Tuberculin; 2:30-3:30 p. m., Prof. Cobb, Children's Clinic; 3:30-4:30 p. m., Prof. Halbert; 4:30-5:30 p. m., Prof. Collins, Therapeutics.

September 18th: 9-10 a. m., Prof. Kent, Kali Phosphoricum; 10-11 a. m., Prof. Aurand, Phytolacca; 11-12 a. m., Prof. Blackwood, Toxins; 2:30-3:30 p. m., Prof. Dienst, Comparative Materia Medica; 3:30-4:30 p. m., Prof. Cowperthwaite, Homeopathic Therapeutics; 4:30-5:30 p. m., Prof. George, Remedies in Diseases of the Ear.

September 20th: 9-10 a. m., Prof. Kent, Kali Iodatum; 10-11 a. m., Prof. Clark, Therapeutics of Endometritis; 11-12 a. m., Prof. Wieland, Therapeutics of Genito-Urinary Diseases; 2:30-3:30 p. m., Prof. Halbert, Tubercular Clinic; 3:30-4:30 p. m., Medical Clinic; 4:30-5:30 p. m., Prof. Halbert, General Medical Clinic.

September 21: 9-10 a. m., Prof. Kent, Sulphuricum; 10-11 a. m., Prof. Aurand, Veratrum Album; 11-12 a. m., Prof. Blackwood, Toxins; 2:30-3:30 p. m., Prof. Dienst, Comparative Materia Medica; 3:30-4:30 p. m., Prof. Cowperthwaite, Homeopathic Therapeutics; 4:30-5:30 p. m., Prof. Bruce, Adjuvants to Medical Treatment.

Chicago, Ill., Aug. 17, 1909.

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

IN THE JULY NUMBER of the *Revue Homœopathique Francaise*, Dr. G. Seiffert mentions the experiments of Doctor Billard with the powder of verdigris in the treatment of pulmonary consumption, and wittingly remarks that the Homeopathic school

has known for quite a while the effects of acidum aceticum upon the mucous membrane, both respiratory and digestive, and the blood; and that Doctor Clark, of England, in his directory, classifies this acid among the curative agents for phthisis.

In the same number Dr. Jules Gallavardin makes us feel how dull are the sharpest heads of *contraria* who, to this date, have not been able to see the double action (congestion in large and depletion in small doses) of Glonoinum, and consequently know not when and where to use it. It is the case of a chisel in the hands of an idiot placed before a beautiful statue. The chisel is all right, but * * * *

In the same number, also, our friend Dr. Julia C. Loos is quoted. Proud of it.

R. DEL M.

SPECIAL AUTUMN COURSE. In another part of this publication may be found the schedule for the special autumn course of medical clinics and lectures to be given at Hahnemann Medical College, Chicago, Illinois, beginning September 7th and ending September 21st, 1909.

On looking over the teaching force one is immediately impressed with the prominence of the men who are to give their time to this far-reaching course of instruction. Among the notables therein mentioned I see the names of Cowperthwaite, Cobb, Dienst, Blackwood, Halbert, Kent, Fellows, Hanks, Bailey and a score of others, any one of whom would be a sufficient inducement to attract attendance of those wishing to acquire helpful instruction.

I am more than glad to note that Doctor Kent heads the list of instructors, and that his name appears for an hour's lecture upon some homeopathic remedy on every day of the session. This guarantees something good along those lines, besides conveys the information that the doctor is in the very best of health.

Success to the "Special Autumn Course" at "Old Hahnemann."

M.

ECHOES FROM DETROIT. I am more than pleased to read in the *Cleveland Medical and Surgical Reporter*, a very literal description of some of the lurid pyrotechnics displayed at the Detroit meeting of the American Institute of Homeopathy during a discussion of the journal question, notwithstanding our former assertion that the aforesaid deliberations were conducted "in the most dignified and enthusiastic manner."

It appears from the foregoing that Doctors Porter and Cowperthwaite became somewhat belligerent and that the former gentleman said "—" (whatever that may have been) right out in meeting.

This journal question is now in the hands of the Institute trustees and I am inclined to think that matters will be adjusted to suit all minds when it comes time to either ratify or reject the contract now in operation, whereby the Institute and its members are receiving about the poorest specimen of loyalty ever displayed. Should the present arrangement survive beyond a very limited period the only hope homeopaths have that their interests will be given even slight consideration lies in the fact that Dr. J. Richey Horner has taken charge of the editorial end of the game.

I am pleased to know that a majority composing the board of trustees are men possessed of brains and business acumen and that no amount of bulldozing on the part of Editor Dewey or the few who may support his contention of validity of contract, will avail with these staunch defenders of the faith.

The eyes of a large number of members of the A. I. H. who are unable to attend the annual meetings of the association, are upon the trustees; so far as THE CRITIQUE is concerned, I have a most abiding faith in the far-sighted fairness of such men as Doctors McClelland, Porter, Custis and the other staunch supporters of the homeopathic school who comprise this committee, and in whose hands the matter rests, to feel any apprehension whatever regarding the outcome of the deliberations. M.

O! YOU TRANSPORTATION COMMITTEE! I am printing elsewhere a communication from Secretary Costain of the Transportation Committee of the forthcoming meeting of the American Institute of Homeopathy. The mere fact that the present committee has accomplished more up to the present time and given more publicity to its progressive policy than any of its predecessors at the conclusion of their terms of office, is not intended as a slam at previous committees, but only goes to show that there is something being done in the direction of furnishing transportation which is quite likely to give the attendance at the Los Angeles meeting a mighty impetus towards "record breaking."

On looking over the itinerary of the proposed special train it will be observed that Denver is on the map, and inasmuch as the trip is planned via the Rock Island route up to this point, is a sufficient guarantee to our eastern friends of the absolute elegance and completeness of all details connected therewith.

The further suggestion embodied in the communication, that a side trip over the Moffat line be made a feature of the special's stay in Denver, is one upon which every person participating in the Pacific coast trip should insist, as the opportunity to witness the sublime and splendid sights to be encountered in a day's trip over this marvelous piece of mountain railroading is one rarely furnished. The Moffat road, by the way, is equipped with every modern device known to high class railroad operation.

This stay will also give the profession of Denver an opportunity to show its hospitality. The state society, too, will have an opportunity at the forthcoming meeting to "open up" and formulate features calculated to advertise this state as a thoroughly loyal adjunct to the homeopathic fighting forces of the country.

Dr. C. E. Fisher is chairman of the Transportation Committee, and from what we all know of the resourcefulness of this rustler, much more may be expected of his committee as opportunity to develop new details materialize.

M.

THE INSTITUTE JOURNAL.

THE SUBJECT OF AN INSTITUTE JOURNAL is one of vital importance, and it behooves any man who has the welfare of the American Institute at heart to put aside any petty prejudice and smother all undue sentimentalism that he may view the matter with clear judgment. First, we must admit that such a journal has its advantages. Reaching each member every month it will serve to keep them in touch with the Institute's work, and increase their interest and enthusiasm. Yet, on the other hand, as has been claimed, and can undoubtedly be proved, the presence of an Institute journal will rob the independent journals of advertising—their chief support, and as a consequence they should have to retire from the field, there being no charitable institution organized for their maintenance. It is pertinent to ask if the American Institute Journal will be able to reach the homeopathic profession in the different states, keep them in touch with their state meetings and publish the different papers read at these state meetings. In Michigan, for instance, there are some 700 homeopaths practicing, of which about 150 are members of the Michigan State Homeopathic Society. At the present time the *Medical Counselor* goes to every member of the state society and most of those who are not, so that, besides a general circulation and influence it has one that is especially local. If the state meetings are of no consequence, we can readily see that an Institute journal as it now exists might fill the bill. The Institute's object is to feed, nourish and strengthen her own growth and not allow a few members, perhaps one, drain its life blood that they may grow fat and prosperous. We cannot compare ourselves to the A. M. A., the numerical difference makes this impossible, and yet a review of their past and present history is not pleasing to democratic minds. The big gun (*Journal of the American Medical Association*) and little pistols (state journals) have succeeded in forming a medical trust that cannot be busted. The secretary and other congenial officers of the A. M. A. cannot be touched by the common herd. The county medical societies send their delegates to the state convention, the state societies in turn send their delegates to the national meeting. It is a great system and George H. Simmons, M. D., knows every fiber of its make-up. Even the bitter and evidently truthful attacks of Dr. G. Frank Lydston, of Chicago, could not remove the "peerless leader" from his self-made pedestal. We cannot stand the same serious quarrels as the A. M. A., nor do we wish to throw ourselves in the hands of a few.—*Editorial, Medical Counselor.*

Miscellaneous Matter

Send Us a Personal Item Occasionally

Circular of Information of the Hahnemann Medical College and Hospital of Chicago for 1909-10, has been received.

* * *

Dr. S. S. Smythe put in considerable time the latter part of July and the first of August "harvesting" on his ranch at Bennett.

* * *

Keep in mind the fact that one of the largest and best meetings of the A. I. H. will be held in Los Angeles, Cal., July 11-16, 1910.

* * *

Dr. Wm. R. Welch, of Maryland, was elected president of the A. M. A., at its last meeting in Atlantic City. St. Louis is the next meeting place.

* * *

Mr. C. E. Burg and family, of Burlington, Iowa, paid an extensive and pleasant visit with Dr. W. F. Burg in Denver, during the greater part of last month.

* * *

The Colorado Homeopathic State Society of the homeopathic faith, will hold its annual meeting in Denver commencing the 8th of the present month.

* * *

Judge John Richter, LaPorte, Ind., before whom the famous Guiness murder trial was tried, was a visitor with **The Critique** family the latter part of July.

* * *

Dr. F. E. Gladwin announces the removal of her office from the Greble building, 1708-10 Chestnut street, Philadelphia, to Roger Williams Building, 1703 Chestnut street.

* * *

The Colorado Homeopathic State Society meets in Denver during the present month. Meetings will be held at the College of Physicians and Surgeons, opposite the city hall.

* * *

In discussing the journal question at the Detroit meeting of the American Institute, Dr. Porter, of New York, is reported to have made use of the word "____!" It is to be hoped that he meant what he said.

Dr. Kinney, a prominent physician of this city, had his touring car put out of commission by one of the Tramway's vehicles the 18th of last month. It does seem foolish for one to "buck the Tramway."

* * *

The business manager of **The Critique** was called to the Western slope on professional business the latter part of last month, and got caught in one of the numerous washouts on the Rio Grande on his way home.

* * *

The Critique is always prompt in its appearance on the date printed in it's title page. A publication that is remiss in this respect either has a hard time in securing the necessary material or else its managers attach but little value to it as a medium for good.

* * *

Colorado has had the hottest "spell" of weather during July and August of the present year that it has been our "pleasure" 'to experience in twenty years' continuous residence here. But just think of the other places where it has been so much worse and then keep still.

* * *

Dr. and Mrs. W. Cary Allen, of Colorado Springs, were callers at the editorial offices of **The Critique** the first of last month. Dr. Allen is one of the warhorses of homeopathy in the state and we are pleased to say gives evidence of being able to continue in the cause for many years. Come again.

* * *

FOR SALE—Having purchased a part of the library of the late Dr. John M. Prilay of Bangor, Me., I am offering for sale about forty-five volumes all in excellent condition. The list includes Gentry's Concordance Repertory, 8 vols. in Sheep; Hall's Jahr, Hales' New Remedies, etc., etc. For complete list and price address **Dr. C. E. Newton, Brewer, Maine.**

* * *

Dr. G. W. Johnson of Leavenworth, Kansas, a pioneer homeopathic practitioner of the Sunflower state, was a visitor in Denver the fore part of last month, having stopped off on his way home from the National Soldiers' Reunion at Salt Lake, to visit Dr. Myrtle Baum and family of this city. It is not altogether improbable that the youthful namesake in the Baum family had something to do with the visit.

* * *

The program of the Colorado Homeopathic Society meeting, which will be held in this city 7th and 8th of the present month, has been received at the office. From appearance of the same one realizes that affairs of this association are fast falling into hands of the

"younger element." The meeting bids fair to be a fine one and should have the support of all. Dr. Worth is to be congratulated upon his promptness in providing this information at so early a date.

* * *

(The News last night sent D. Z. Dworzak, an eminent physician and also a thorough musician, to criticize "The Merry Widow," as an expert. Now of Denver, and formerly of Vienna, he has had a double honor paid him—Emperor William has intrusted a throat malady to him for relief, and Lehar, his intimate friend and author of "The Merry Widow," has intrusted his music for a performance before King Edward of England.)—**News, August 16, 1909.**

Quite a tidy bit of advertising? No! Yes?

* * *

A very neat "arrival" card reached our home the latter part of July, announcing the appearance of Master Warren David Long on the 4th of the aforesaid month. He is the son of Dr. and Mrs. Ross D. Long, of Oklahoma City, Okla. Many of the old guard at the Denver Homeopathic will remember Dr. Long as a student at that institution in its earlier days; later on the doctor finished in an old school institution and his many friends in this vicinity will be pleased to know of his prosperity, not only in a professional but paternal sense, since leaving Denver.

* * *

Dr. Wm. J. Hawkes of Elden avenue, Los Angeles, had a horrible experience July 24th. He was called hurriedly to an accident case near his home and found the patient to be his own little 7-year-old son, Wm. J. Hawkes, Jr., with a fatal fracture of the skull. The boy was riding a new wheel and turned to get out of the way of an automobile. He ran directly in front of a wagon loaded with brick and was knocked from his wheel and ran over before the driver could stop. The doctor has the deep sympathy of the profession in Los Angeles. It seems as though there is hardly room for boys in the streets of American cities.—**Southern California Practitioner.**

* * *

The **Cleveland Medical and Surgical Reporter** has this highly complimentary comment to make regarding Detroit physicians in general and the Press committee of the A. I. H. in particular: "The Detroit physicians as entertainers are a great success. Perhaps of all the committees the Press committee was composed of the best American brand of hustlers. Dr. Dale M. King was the energetic chairman of this committee and it is due to his direct efforts that matters homeopathic were given such great publicity. If there is a man, woman or child living in Michigan today who has not heard of homeopathy since June then Dr. King missed a trick. But we don't believe he did."

Dr. King is a well seasoned editor and was the right man for the position he occupied."

* * *

His horse becoming frightened and unmanageable, Dr. F. C. Strong, 598 South Lincoln, was dashed against the side of the Thirteenth avenue bridge over Cherry creek this morning at 8 o'clock, and was severely injured. The doctor was driving toward Speer boulevard at Eleventh avenue, when the horse ran away. Arriving at the Thirteenth avenue bridge, the horse attempted to cross it. The buggy was smashed against the side of the bridge, and the doctor was thrown out. He received numerous severe bruises. His back was hurt and his left leg injured. Dr. Strong was taken to the county hospital, where his injuries were dressed, and later he was removed to his home.—*Daily Express*, August 21.

Dr. S. S. Smythe, who has been attending Dr. Strong since his injury reports him doing nicely, *The Critique* is pleased to chronicle.

* * *

Our business manager feels constrained to make the following statement: In the July issue of *The Critique*, the "Hammer Artist" says, "If Progress continues to cut its size in the next year or so as industriously as it has in the past, there will be nothing left of it, etc." Now, the facts are as follows: The pages of Progress have been enlarged in size, and the matter in two columns, which gives us more space, and if the said individual had investigated before he allowed his "mouth to explode," he would have found about 12,000 words of reading matter in *The Critique* and about 15,000 words in Progress. The moral is obvious. Then again, he has a grouch coming, owing to the fact that we come out on the 10th to 13th of the month. It would be interesting to know who gave him authority to say on what day we shall go to mail with Progress. As for ourselves, we find it keeps us quite busy to attend to our own business without forcing our uncalled-for attentions on other publications. Progress is keeping quite well, thank you; is growing in circulation and importance right along.—Jno. A. Stimson, in *Progress*.

The foregoing sample of sub-primary simplicity is about the only evidence of real "life" ever displayed by the pamphlet from which the foregoing is taken. We feel rather sorry for "our business manager" who is apparently taking upon himself the troubles of this tail end of nothing, and yet we cannot help but admire the sensitive nature which shows through his peevishness. A nice, ladylike individual of the Stimson style of beauty should choose some less exposed line of employment inasmuch as if he is to continue as color bearer for the *Progress* push we feel there is considerable excitement in store for this modest little business manager besides some real congenial employment for the editor of *The Critique*.



READING NOTICES



Of Interest to Everybody

CHRONIC CYSTITIS WITH ALKALINE URINE—If the urine is alkaline nothing gives so good results in chronic cystitis as benzoic acid, given in capsules of five grains every three hours, in connection with teaspoonful doses of sanmetto. If an antiseptic is desired give salicylic acid internally in five-grain doses, at intervals of from two to four hours, or if contra-indicated, then use boric acid in powder form ten to twenty grains instead.

THE EARLIEST SYMPTOM OF ENLARGED PROSTATE—Increased urinary frequency, chiefly nocturnal in character, is the earliest and most frequently encountered symptom of enlarged prostate. Many cases of hypertrophied prostate might never develop beyond this point if sanmetto was administered as a prophylactic, and the discomfort of rising two or three times at night to urinate, to say nothing of entering upon a catheter life, might be avoided.

It is especially in the chronic prostatic hyperplasia which we find in old men, always associated with chronic vesical catarrh, that sanmetto gives the most brilliant results. Numbers of cases can be recited in which the use of sanmetto alone has not only relieved the vesical irritability, but has seemingly reduced the hypertrophy of the prostate and enabled the patient to dispense with catheterization and micturate unassisted for the first time in years.

THE ACTION OF SANMETTO IN GONORRHEA—The philosophy of the action of sanmetto in gonorrhea may be explained in this way: Sanmetto has no direct germicidal action in the treatment of membranous conditions due to the invasion of the gonococcus. It should be borne in mind that sanmetto does not directly destroy gonococci. Whatever may be its direct action upon these germs, it is certain that it does not have any such directly germicidal influence. What is probably does is to set up in the mucous membrane a reaction to the inflammation or a nutritive toning up of the parts, which brings to the parts a sufficient reinforcement of leucocytes to overwhelm the germs—the gonococci. This view of the action of sanmetto explains the apparent aggravation which sometimes is set up in the treatment of chronic inflammation of the bladder and urethra, and a consequent sloughing off of shreds and purulent matter, causing the patient to

*Pages 323-324
not in*

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Denver, Colorado, October 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

PREGNANCY AND SYPHILIS.*

By S. S. Smythe, M.D.

SYPHILIS, when considered in its relation to pregnancy, becomes a study of absorbing and fascinating interest. No other complication of pregnancy produces such an array of puzzling and indefinable manifestations of illness in the mother, as the syphilitic taint in her blood. Without a knowledge of her previous infection the attending physician will be utterly at a loss to account for her peculiar condition. He may suspect the truth and be able to give some assistance, but usually it is a blind trail.

A woman may acquire the syphilitic cachexia in so many ways that she may be in entire ignorance of her infection. The observing physician is often the only one who knows that the mother of a syphilitic child is entirely blameless, so far as any moral turpitude on her part is concerned, and medical ethics in most cases closes his lips against explanation that ought in justice to be made on behalf of an innocent woman.

There are various ways by which a woman may become infected indirectly, without her knowledge or consent.

One of the most common means of unconscious infection of the mother is through her own offspring. Since it is an established fact that a man having secondary or tertiary syphilis will transmit the disease to the fetus, and through the fetus and placenta, the innocent mother becomes infected.

Then again, after a perfectly pure conception has taken place, the husband may acquire syphilis and infect his wife, who, in turn, transmits the disease to her child with all the fatality that goes with any form of hereditary syphilis.

Of course there are other indirect means of conveying the infection, but the above will suffice for the purpose of this paper, which is designed to be merely a resume of the more salient features of the disease in its relation to pregnancy.

There are many anomalous conditions connected with syphilis in pregnant women which demand the constant and careful consideration of the physician.

Syphilitic women who conceive are very sure to bear syphilitic children. The infection of the child takes place in utero,

*Read at the Colorado State Homeopathic Society Meeting.

and the fetus may be destroyed in utero; or, it may be born with all the manifestations of the disease in full bloom, as it were. On the contrary, the child may be born apparently healthy, without a symptom of infection, only to have the dread disease appear in a few weeks or months after birth. Further, the infection may remain latent until puberty and then manifest itself in a most virulent form, thus demonstrating the anomalous persistence and ineradicable nature of the syphilitic poison.

A pure woman will not only bear syphilitic children by a syphilitic father, but she herself will become infected through the fetus.

No matter how the disease may be acquired, primarily, secondarily, indirectly or by heredity, it is there to contaminate the blood and dominate the future of the individual as long as life shall last. There is no getting away from it or rid of it. Syphilis poisons the sources of life.

"Once a syphilitic, always a syphilitic," is an ancient dictum in which I thoroughly believe. There is no cure for syphilis in the sense that the infection can be entirely eliminated from the blood. We may observe the disappearance of all objective symptoms in a given case, and the patient may be to all outward appearances cured. But is he cured? Experience has but one answer: No.

Neither time nor medicine can cure this disease. Under no condition is this so surely and constantly demonstrated as in pregnancy. Years after original infection, where all manifestations of the disease have disappeared, and the woman is supposedly cured, she marries, conceives—and bears a syphilitic child. Any theory of cure is a mere fallacy, calculated to deceive and mislead the public.

These are not occasional results of the infection in pregnancy, but are constant and invariable, almost without an exception.

The hereditary transmission of syphilis is one of the surest things we know. Once acquired, the infection dominates the life of the recipient and that of her progeny.

The greatest menace to the future of our race is syphilis.

The "great white plague," tuberculosis, about which we hear and talk so much in these times and which has enlisted the aid of all the governments in Christendom for its control and suppression, is a negligible quantity in comparison. This statement may seem extreme and extravagant, but in my opinion it is not so. Tuberculosis, according to present scientific belief,

lacks the element of heredity which invariably characterizes syphilis and makes it the perpetual foe of the human race.

Syphilis, once acquired, dominates the human system. It simulates, magnifies and aggravates every form of disease. Tuberculosis grafted upon a syphilitic base becomes absolutely uncontrollable and incurable.

While millions of dollars are annually expended for the instruction of the people in all the measures for the prevention of tuberculosis, what has been done to aid in the suppression of this greater evil?

Syphilis has been held a secret social evil, which should be kept in the dark background of human knowledge, but the time has come when this whispering gallery of secrecy should be torn down, and the full light of publicity should be thrown upon the screen.

The acquisition of syphilis is not a crime, but a great misfortune which should elicit the utmost efforts of the medical profession, and of all others, to limit its ravages. Our knowledge of the disease should no longer be confined to the medical profession. The people should be fully informed as to its real character, and instructed in all the known means for its repression and prevention. Let us take the people into our confidence and instruct them as we do in other matters pertaining to public health.

But can we prevent the spread of this disease? Yes, in one very important direction, that of hereditary transmission. This, however, can only be done by preventing procreation among the syphilitic.

At first thought this may seem an impossible proposition, but a little consideration will convince you that it is not only possible but entirely feasible and practicable.

Every syphilitic man, woman and child should be made sterile by the simple means of castration. The suggestion of this measure will, at first, arouse a feeling of repugnance and opposition in the lay mind, but a clear exposition of the subject by the profession would convince the people and enlist the willing co-operation of the syphilitic, when they fully comprehend its importance to themselves, and to the future of the race.

Castration in either sex is simple, safe and permanently effective. The mortality of the operation when carefully performed may be counted as *nil*. In the male, vasectomy, a much simpler operation, would probably be equally efficient, without diminishing in any material way the sexual activity of the individual.

This subject, in my estimation, is one which should enlist the attention and co-operation of all the profession. The public must first be educated up to a full understanding of the entire question, and made to understand its vast importance to humanity.

Syphilis should no longer be considered a mere personal vice to be covered up and held in secret by the individual and the physician. Heredity is not a crime. It is a misfortune, which should enlist public sympathy and supervision, to the end that legal means for its prevention may be adopted and enforced.

OUR WOMEN.

By R. del Mas, Ph.D., M.D.

IN THIS SHORT BIOGRAPHICAL SERIES, we will endeavor to sketch our women in their respective features before, during and after menses, and will follow their physiological lines, thinking it better to classify symptoms in that way than in beginning with the head and ending with the feet. So we will see their nervous symptoms in one group, their circulatory symptoms, their respiratory or gastro-intestinal characteristics in other groups, and so on. He who is familiar with physiology (and where is the physician who is not?) will readily see how our remedies act and how our patients are sick. There are no reliable symptoms in the pathogenesis of a given remedy which cannot be physiologically explained. Were embryology, anatomy and physiology known thoroughly well by our students, no doubt they could build on such a three-legged stool the *materia medica* and principles of practice of homeopathy to a good advantage, and be able to defend the therapy they stand for. The mechanical part of the medical art would lose nothing by such a fundamental knowledge. But we must stuff our boys and girls with bugs and pathological cells, for disease is bug and bug is disease, and the cure of the disease is in the killing of the bug.

When the gods wanted to annihilate medicine, they made fools of its leaders, and bacteriology became their idol. The spirit of death has already been found; it is the bug. The spirit of life is known also; it is the antitoxin. Every allopathic gentleman is an alchemist; and proud of it, too. . . . But no one has been able to ascertain yet whether the bug lived before man existed, whether the bug preceded disease as a cause, or followed it as a concomitant, and whether or not what the

savant does experimentally with his bouillons is the true copy of what Nature does every day when disease is present in the laboratory of the body. The savants do not care to concern themselves about it. The same remark applies to their experimenting with drugs on lower animals, and deducting from such experiments the action of the same drugs on the highest and most perfect animal on earth, called man. How can the animal tell how he feels under the action of such or such remedy? But if the savants can have the blood pressure, the reaction of the muscles to an electric stimulus, know how the salivary, sweat or sebaceous glands are affected, how many times the bowels can be whipped to run, or how long they will lie dormant, it is all they care (and necessarily need) to ascertain. Under the microscope, under the knife, in the beaker, with the stethoscope, everything is palpable; hence everything is matter; and the practice of medicine resolves itself in knowing how much matter you can use to antagonize or destroy a material substance (disease or death). So, if one single remedy is not weighty enough, it shall be doubled in quantity or coupled with one or a dozen more remedies, that the cure be secured more gently, promptly and surely; and when polypharmacy leaves the arena, therapeutic nihilism shall come to the front. In our ranks, also, we have many of such savants who, in the language of the Scripture, are but ringing brasses. They must resort also to the ready-made compound pill, to the crude dose only; and when you hear them at the society meetings they make you blush to the point of bleeding. Try and convince them. Has anyone, in the life of man, been able to convince a fool that his balance wheel was out of gear. They deny, because they do not know; they are ignorant, because they refuse to test; and they do not test, because they fear of being convinced. In resume, this spells "conceit," plus gab, minus sense, equals ringing brass. Let us leave aside the sons of Aeolus and begin with our women. If we do not call them to the stand in the alphabetical order, we beg to have our views respected in this matter, if they do not injure anybody:

Before menses, MRS. BORAX notices, as forerunners, that her chest feels heavy, her head throbs with rushing noises in her ears, her stomach aches, the pain extending to the small of the back, where it becomes stitching; her uterine region is full of stitches; so is her right pectoral region. During menses, her congestive headache continues and wants no warm wraps, her ears roar or rush, buzz and hum, her head is dizzy on going down stairs (before menses also), her stomach pains and is nauseated, especially during mental occupation; cramps or colic ex-

tend from the epigastrium to the inguinal region; her groins burn; stitches are felt in the back and in the uterus; spasmodic pains, stitching and pressing are felt in the uterus. They are violent, labor-like pains, and pieces, or entire casts, of the endometrium are expelled with the flow which is accentuated in the morning, or only present at night. About a week or ten days after menses, she passes a starch-like or an albuminous (like the white of an egg), acrid, ropy, copious leucorrhœa. As long as her leucorrhœa lasts, and her endometrium exfoliates, she remains sterile. She is not inclined to sexual relations. Her mind and body are sexually passive, like her cousins, Natrum carb. and Natrum mur. Whenever she is fortunate enough to bear an offspring she cannot nurse him because he refuses to take her thick and loathsome milk. In and out of the menstrual period, she dreads downward motion, which sets her nerves all in a fret, and makes her feel as though she suddenly and rapidly went down in an elevator. Rocking and swinging get her dizzy, give her a sensation of falling. From a sudden noise she will start, be nervous, and get diarrhoea. A very queer thing also about this sister of ours is irritability or dissatisfaction before stool. She will weep during stool. Of course, we remember that Natrum mur. cannot void urine if somebody is present. Natrum carb. avoids the sun rays, and is irritable after stool. The confusion of mind of Borax and Natrum sulph. is ameliorated after stool; they are both cheerful after stool; but the latter seeks the open air, and the former shuns it. The hair of Mrs Borax sticks at the ends, or tangles easily. Her mood is quite changeable, from laughter to weeping.

MRS. NITRIC ACID is quite anxious before the flow, sad also; in fact, she is always very sad. Things look dark. Trifles excite her, get her mad and vindictive. The rattling of wagons on the pavement, the splashing of water go through her head. But, if she can have a ride, a sliding motion, she is at her best. Then, she forgets her troubles and how to trouble others. Although she has very little respect or sympathy for those who offend her (that is, no apology will ever soften her down), she is quite sensitive to sensual impressions (Chin., Nat-c). Wherever she feels a pain, she has slivers (Hep.), or splinters. Her urine is cold when it passes (Agar.), all the time scanty (before menses, Apis; during menses, Natrum mur.), and smells like that of horses. Her rectum, which is more prone to pass a diarrhoeic than a constipated stool, is fissured and very painful, burning, after stool, and in the night. Her joints and lower jaw crack on motion. Where the mucous membranes join the

skin, zigzagged, stitching, granulated, bleeding, offensive, ichorous, deep or superficial, and phagedenic ulcers form. About her genitals, she possesses jagged, moist, pedunculated, large, sticking, soft warts, generally of long standing and bleeding easily on washing.

Her menstrual contribution is brown, dark, scanty and intermitting (Kroes., Puls.), by fits and starts. During the flow, she gets up, in the morning, with a headache, a painful sensation of tightness in the skin of the forehead. Her eyes burn, and then, as well as at any other time, her mouth gets watery during mental work. She is the only member of the fair sex having this peculiar brand mark. While flowing, her teeth ache and gums swell (Baryta carb.), she eructates with cramps and pains in the abdomen. The pains are violent, seem to prefer the liver region, and last after the flow (Natrum mur., Puls.). After stool, she suffers the most excruciating abdominal pains (reverse of Nux., Rhus. and Colch.). It is said of Borax that, when she yawns, she feels a pain in the right inguinal region. (Such singularities make the germaniac laugh; and why shouldn't they?) And the pain of Borax extends to the right shoulder blade. During menses, Mrs. Nitric Acid feels cramp-like pains, as if the bowels would burst, with eructation and constant desire to move about. That summarizes her abdominal feelings during that period, if one adds to it the funneling sensation of Lilium, Natrum Carb., Sepia and Belladonna, as though everything would protrude from the vulva, and the labor-like sensation extending into the thighs and legs or loins and back (into hips or anus, Calc-e.); but she crosses not her legs, nor is she oppressed like Sepia. With the labor-like pains she says not, like Borax, that her groins sting; nor does she go into a swoon, like Lycopodium. During menses, the heart of Mrs. Nitric Acid palpitates, her legs are very weak and tired, with a pulling or aching sensation in the thighs. Her back aches constantly, but more so before the flow starts; and she is so tired and weak all over she can hardly breathe, and must lie down (can scarcely talk, Carb-an. and Stann.). She is generally cold, wants heat, has a tendency to take cold. Coition aggravates her very much. After eating, she is overpowered by sleepiness. She is much inclined to perspire on motion or during a slight exertion, and her sweat is offensive or sour, favoring the parts lain on (China), and being very apt to occur once every other night (Baryta carb.), giving the clothes and skin a scent of horse's urine or man's urine (Canth.). If her menses do not excoriate her, her leucorrhœa will; it is a brown discharge, burning the parts it flows over (Lil-tig). It,

at times, takes a greenish tinge (Merc. Sep.), but is always offensive and ropy, and occurs after menses. It might be remarked here that the leucorrhœa is brown when it immediately follows upon the menses, taking a greenish appearance as it gradually proceeds in its course. The same remark applies to secale. After confinement or abortion she will have the hypogastric pains mentioned above, with violent pressure, as if everything was coming out at the vulva, with pains in the small of the back going to her thighs and legs. Whenever she takes hysterical manifestations, she will crave earth, dirt, lime, chalk. In this she resembles Mrs. Nux, who, like her, prefers fat to lean meat; and, like Phosphorus, is very anxious during a storm. She also feels labor-like pains with the leucorrhœa.

MRS. LAC CANIMUM is a highly-organized being, nervous, restless, forgetful, cross and irritable, malicious, as hateful and inclined to swear as *Lilium tigrinum*, Nitric acid and *Anacardium*. She is sad, indolent, despondent, hopeless, chronically "blue." She often has a sense of levitation. (Asar., Lach.). She is chilly; but, once a rheumatic pain is felt anywhere, she must have ice cold applications to relieve it. Her pains are erratic (quickly changing place, Puls.), alternating sides in a few hours or days.

Before menses, her melancholic mood is increased, her throat gets sore and painful, and she has a dry cough, much like *Magnesia carb.*; the throat trouble increases as the menses flow (Calc.; reverse of Mag-c.). Two days before the menstrual period returns, her forehead aches, first on one side, then on the other. This "alternating" character applies also to her throat. Her voracious appetite is quite manifest then also (Mag-c.), and, as ever, food relieves not her stomach emptiness. She is, in fact, always hungry. Her nerves are crying for food constantly. She craves whisky, highly seasoned food, warm drinks, something that will stimulate her and make her feel happier, warmer, not so "blue." Before menses, her mammae swell and become sore and painful (aching when empty, Borax), just like *Calcarea*. During the flow, her throat and chest symptoms continue (Calc.). Her stomach goneness never leaves her. She complains of labor-like or bearing-down pains, a real dragging feeling, as if the contents of the hypogastrium would burst out above the pubes (through the vulva Sep.); and that sensation is noticed only before the catamenia starts. While the flow

goes on, her abdomen is bloated, rumbling, mostly in the left side (*Lyc.*), very sensitive to deep pressure which causes nausea, and yet there seems to be no flatulence (reverse of *Lyc.*): she seeks relief by leaning backwards. With this distress is associated also a sensation of heat in the uterus and ovaries (stitches in ovaries before and during, *Borax*), with emission of flatus per vaginam. It is said that before menses Mrs. *Lac. Caninum* is very apt to find her right ovary is inflamed, sore and sensitive, aggravated by the least touch and motion, even by breath. This merely tends to prove her to be an oversensitive person. She also has delusions, such as the feeling as from something alive in the vulva; and, with her inability to think connectedly, imagines snakes surround her, or run up and down under her skin. These mental symptoms are conspicuous during the flow. And again, her genitals are readily excited by touch or friction (*Murex*). Kent places her alongside of *Lachesis* in this hyperesthesia of the nerves endings and sense of levitation or horrible visions. But they part from one another in a particular way: that is, *Lachesis* wants to be alone to indulge the strange fancies that haunt her brain, and *Lac Caninum* seeks company, because her horrible visions, when alone or in the dark, frighten her terribly. Kent calls one's attention also to another strangeness of this woman; like *Alumina* and *Caladium*, she is in doubt or uncertain as to the truth of what she says. She consequently believes everything she utters is a lie. She cannot realize whether a thing is or is not. (Deeply sycotic persons are so.) She will often go shopping and leave her purchases behind, forgetting them (*Iod. Lecithin*) While flowing, her pelvis will be ameliorated but her breasts, throat and cough will not. All of her complaints have a tendency to start from the right and go back and forth from one side to the other. Her ovarian difficulties have this singularity also. *Lyceopodium* goes from right to left and stays there; *Lachesis* from left to right and does not change; and *Murex* extends diagonally across up towards the chest. These last three women are quite amorous.

Centerville, Minn.

(TO BE CONTINUED)

SELECTED

AN UNSETTLED QUESTION.

WHILE THE AMERICAN INSTITUTE of Homeopathy in session at Detroit passed final judgment upon many serious matters, there was one question of prime importance that it deliberately and definitely left unsettled. That question in brief was:

"Shall the Institute Have an Official Journal, and, if so, What Kind of a Journal?"

This necessarily involved consideration of the merits of the alleged contract made by the journal committee with the Medical Century Company for the establishment of such an official organ.

After a somewhat discursive but generally vigorous debate extended over parts of three days, had been held before the Institute sitting as a committee of the whole, the impossibility of securing an intelligent judgment on the multitude of details presented, in the limited time at disposal became apparent. It was, therefore:

"Resolved, That the report of the journal committee be received with its amendments, and the journal committee be instructed to continue in charge until the new board of trustees is organized and in position to take charge of it as prescribed by the certificate and articles of incorporation."

This resolution was reported to the Institute by the committee of the whole and unanimously adopted.

By this advice the entire matter was referred to the board of trustees who take office September 26, 1909. Until that time the Journal of the A. I. H. will be published as at present. At the first meeting of the trustees they must pass upon the alleged contract made with the Medical Century Company and accept or reject it. They must decide upon the kind of journal the Institute shall have and dictate the policy that shall control it. In short, they must settle this now unsettled question.

The editor of the Journal of the A. I. H. and some of his friends are entirely in the wrong in supposing that the word

"received" in the resolution is equivalent to "adopted," or "approved." The attempt to substitute these words in the committee of the whole was deliberately rejected. The question was shelved, not settled.

The debate brought out very clearly two undoubtedly majority opinions. First, that some kind of an Institute journal ought if possible to be arranged for, and second, that the alleged contract with the Medical Century Company as reported, should be rejected. The trend of sentiment in this direction was unmistakable and can not be honestly disputed by any intelligent observer.

The fact that this matter is of such paramount importance, that it is still unsettled, that it must be determined in the near future by the board of trustees renders it desirable that the case against the present temporary official organ of the Institute be fully presented.

The Existing Journals.

Since the establishment of homeopathy in this country, in all its struggles and battles, in all its defeats and victories, the journals of the school have been foremost in the fray. The editors of these journals received no salaries, derived no profits, but too often were obliged to themselves pay for the deficiencies in the expense account. For half a century the journals of the homeopathic school have fought for its principles, defended its faith, spread its beliefs, evidenced its influence, increased its power and helped to extend it from ocean to ocean. They have given, with few exceptions, without expectation of reward, the best hope, courage and ability they possessed. Since the beginning of the American Institute, it has had the most loyal and earnest support of every homeopathic journal.

Full and even elaborate reports of its deliberations have always been printed and its addresses and papers have been published and scattered broadcast over the land. Before the meetings of the Institute every homeopathic journal usually published an announcement and in an enthusiastic editorial urged every homeopathic physician that it reached to attend. The official organ, by the way, in its June number did not mention the meeting of the Institute at Detroit, nor did the July number of the organ

contain any account of the proceedings, except a brief and misinforming editorial.

A list of the editors of homeopathic journals is practically a list of the most distinguished men of the school, and the journals they so loyally served, in turn loyally supported the cause of homeopathy. In supporting homeopathy they supported the Institute, but they did not mistake a part for the whole.

By reason of this loyalty of service the various journals of the school have practically been organs of the Institute, in a sense belonging to it, and are, it would seem, entitled to a decent recognition.

If the homeopathic editors with scarcely an exception, are afraid that the establishment of an official organ will cripple all and eventually destroy most of the existing homeopathic journals, it is because as experts in the publishing business they foresee clearly that which is certain to happen. Investigation shows that already the weakening process has begun. The official organ is authorized, under its alleged contract, to enter the field both for advertisements and subscriptions. In advertising it is able to offer very attractive inducements, and advertisers, feeling that they can reach the majority of the school through the official organ, are not going to accord much patronage to independent journals.

As to the subscriptions, if the journal is to be conducted upon the same lines as other journals of the school, many members of the Institute, getting the official organ for nothing, will cease to subscribe for non-official journals. To non-members the Institute Journal will appeal in direct competition with the older publications of the school.

And here let it be said that those who so insistently urge that the opportunity to secure a journal free of cost will attract into the Institute many who are not satisfied to receive a bound volume of transactions in return for their membership fee, have never replied to the obvious rejoinder that these same men can get the Institute journal and save \$2 by sending a \$3 subscription direct to the publisher instead of joining the Institute. And we are likely to see the membership of the Institute decreased instead of increased, for it will not take long for many who now sit rather loosely to the organization to discover that they can get as much as they want out of the Institute for \$3 instead of \$5. To attract members, and to hold members, the official organ must be made a \$5 journal; and this change would, at the same time, remove it from direct competition with non-official journals.

The present policy, if consistently pursued, must eventu-

ally result in one homeopathic journal—the official organ. The other journals would have disappeared. Such a policy might at first appear to strengthen the Institute, but the Institute is not the school.

There are two or three journals which are the official organs of homeopathic state societies and are helping to build up and maintain effective homeopathic organizations in their respective territories. What sort of service will the Institute do for homeopathy if its official organ drives those publications out of existence and consequently weakens, if not cripples, the local organizations?

It is plain that antagonism between the organ and the other journals would be inevitable. The latter would be forced into it in an endeavor to secure a continued existence, and the school would be weakened and disrupted.

The statements made by some adherents of the organ that it will rival the *Journal of the American Medical Association*, are simply silly. We have at present neither the institutions, wealth, influence nor men. The official organ was the *Medical Century* and is still the *Medical Century* in everything but name and officialism.

Is it unreasonable to demand a careful consideration of the journalistic situation? Better twenty independent journals than one official organ!

The Alleged Contract.

During the debate at Detroit, the journal committee and their supporters were confronted by a number of statements which they never attempted to meet. The inference is that they were unable to controvert them. These statements are so important, so vital, indeed, to a full understanding of the matter, that they are here briefly repeated. They seem to be somewhat formidable arguments against the acceptance of the alleged contract with the Medical Century Company, and they were never answered:

(a) That the alleged contract was vague and indefinite, in that it contained:

1. No agreement concerning the printing of papers read before the A. I. H.
2. No outline of the functions or duties of the official organ.
3. No ethical standard of advertising.
4. No instructions as to its relations to other journals.

(b) That under the alleged contract the American Institute of Homeopathy owns nothing. The Medical Century Company owns everything.

(c) That under the alleged contract the American Institute of Homeopathy controls nothing. The Medical Century Company controls everything.

(d) That under the alleged contract it was absolutely the Medical Century Company's journal and NOT the journal of the A. I. H.

(e) That under the alleged contract the Institute is paying from \$3,000 to \$5,000 per year, merely to rent space in a journal that it neither owns nor controls; when it could own, control and publish its own journal for less money.

(f) That the alleged contract simply takes the *Medical Century*, gives it 2,500 new subscribers and pays the Medical Century Company \$2 per head; added to that it gives the *Medical Century* all the rest of the income of the journal.

These statements are all based on the alleged contract between the journal committee and the Medical Century Company, published in the May number of the *North American*, and were not disputed, in any way, at Detroit by the organ's friends. In fact, they displayed a most distinguished ability in avoiding them. So wisdom was justified by her children, for no reply was possible.

It is somewhat singular, too, that—

(g) No homeopathic journal except the *Medical Century* ever had a proposition offered from the journal committee that it was possible to consider for a moment.

The letter sent out by the chairman of the journal committee was so vague and indefinite that no estimate was possible, and such points as could be understood seemed to make the proposition impossible.

(h) The *North American* was not offered this apology of a proposition until the last of October, 1908, about ten days before the meeting at Cleveland of the journal committee. Neither the *North American* nor any other journal was invited to Cleveland nor had the slightest chance to bid on a monthly journal and the completely changed proposition offered alone to the Medical Century Company.

These statements are not open to successful dispute. They are supported by practically the entire homeopathic editorial profession. In view of this it would seem that—

(i) The matter of the selection of the official organ was settled in advance and that it was not proposed to give any other journal a chance. In fact, such is believed to be the case, and has been practically acknowledged by one of the most active members of the journal committee.

The statement was made and could not be denied that—

(j) When the alleged contract was signed the Medical Century Company "was not a corporation, but a corpse." In other words, it had no legal existence either in New York or Illinois, and could not, therefore enter legally into any contract.

There are many other legal points that might be detailed against the validity of the so-called contract, but it is unnecessary to present further argument.

It may be discovered, from what is here presented, how much truth there is in the statement contained in the leading editorial in the journal of the A. I. H. for July that the journal committee presented certain amendments "which answered all the valid and serious objections presented by the opposition." These amendments were trivial and effected no material change in the situation. It was not intended they should.

A resolution offered before the close of the debate but not pressed to a vote when it was proposed to refer the matter to the trustees, seemed to meet with general favor. The resolution was as follows:

"That there be an official organ of the A. I. H. That the journal print only Institute papers, society news and official business matters, and such original matter as may be authorized by the trustees. That no advertisements be accepted except those strictly homeopathic, coming from homeopathic firms and institutions."

Some such arrangement as this would give the official organ a free field to exercise its talents in promoting the growth of the Institute and at the same time would allow the independent journals a chance to exist.

The arguments against the endorsement of the alleged contract between the journal committee and the Medical Century Company are so cogent, so overwhelming, in fact, that there can be no doubt as to what action should be taken if the interests of the Institute are to be properly protected.

It seems incredible that the members of the journal committee individually or singly could at any time or place enter into such an absolutely preposterous and unbusinesslike agreement. The contract cannot be defended because it is indefensible. All that has been heard in its favor has been heated and extravagant assertions by excited partisans. But assertion is not argument and something more than assertion will be needed to meet the known facts. This question will not be settled until it is settled right. And that just now is the somewhat arduous duty laid upon the Institute's Board of Trustees.—*Editorial North American Journal of Homeopathy.*



COMMUNICATIONS

ADDITIONS AND CHANGES, A. I. H.

PLEASE be advised of the additional names on the Committee of Organization, Registration and Statistics of H. A. Aldrich, M. D., Minneapolis, Minn., and T. H. Carmichael, M. D., Philadelphia, Pa. Also that the meeting of the trustees of the American Institute of Homeopathy (Inc.), has been called for October 6, 1909, Washington, D. C. It was originally called for September 28, 1909, but because of the desire of several that it be postponed a few days later, it has been so ordered.

Yours very sincerely,

JAMES M. WARD, M. D., President, A. I. H.

* * *

THEY LIKE THE CRITIQUE OUT IN CALIFORNIA.

I WISH AT THIS TIME to return the thanks of this College, as well as my own individual thanks for your kindness in sending us your valuable medical journal for the past year. It is always on file in the reading room of the College, and we find that it is constantly being used by both professors and students.

We realize that these demands are very extensive upon your mailing list, and yet we take the liberty of trusting that you may be able to continue our College upon that same list.

Thanking you for your past favors, I am,

Very sincerely yours,

GUY E. MANNING, M. D.,

Librarian, Hahnemann Medical College of the Pacific.

* * *

STAND TOGETHER.

THE SOUTHERN HOMEOPATHIC Medical Association is gaining constantly in membership and enthusiasm and the coming meeting, which is to be held in Hot Springs, Ark., November 15th, 16th and 17th, 1909, promises to be the most enthusiastic and successful meeting ever held by the association.

Many have signified their intention to be present and offered their assistance and hearty co-operation in the upbuilding of the cause of homeopathy in the South. Let all who can rally around the banner of homeopathy at Hot Springs and make it the best meeting ever held by the Southern Association.

One important reason why homeopathy in the South is not what it should be is because the homeopaths do not stand together. Why do you send your surgery to an allopath, when there are men in our school who can do it just as well? If there is not a homeopathic surgeon convenient, get a good man to locate near you and send your special work to him. In doing this homeopathy will take the place it should.

Stand for homeopathy, first, last and all the time.

In union there is strength.

DR. WILLIAM A. BOIES, Secretary,
Southern Homeopathic Medical Association.

* * *

THE INSTITUTE.

THE FOLLOWING ADDITIONS, corrections and alterations are made to the list of committees as previously published:

A. B. Norton is a member of the Committee on Resolutions and business, not A. B. Morton.

E. P. Mills, Ogden, is a member of the Committee on New Members, not E. P. Hills.

H. F. Staples, M. D., Cleveland, O., and John C. Calhoun, M. D., Pittsburg, Pa., are added to the Committee on New Members.

The Committee on Publication consists of J. Richey Horner, chairman; Joseph P. Cobb, Chicago, and T. H. Carmichael, Philadelphia.

The local Committee of Arrangements consists of the following: Honorary Chairman, W. J. Hawkes, M. D., Los Angeles, Cal.; chairman, F. S. Bernard, M. D., Los Angeles; secretary, T. C. Low, M. D., Los Angeles; treasurer, E. C. Buell, M. D., Los Angeles; W. E. Waddell, M. D., Los Angeles; W. E. Nicholls, M. D., Pasadena; Eleanor F. Martin, M. D., San Francisco.

The Committee on the American Association of Clinical Research is as follows: Chairman, James Krauss, M. D., Boston; Walter Wesselhoeft, M. D., Boston; Fred B. Percy, M. D., Brookline, Mass.; DeWitt C. Wilcox, M. D., Boston; Charles L. Nichols, M. D., Worcester, Mass.; Royal S. Copeland, M. D., New York; John E. Wilson, M. D., New York; William A. Geohegan, M. D., Cincinnati; Willis B. Young, M. D., St. Louis; H. R. Arndt, M. D., San Francisco; Thomas G. McConkey, M. D., San Francisco.

J. RICHEY HORNER,
Secretary, American Institute of Homeopathy.

* * *

A BOOSTING CLUB.

TO THE EDITOR: Why not a "Booster Club" or "Praise Your Brother Club" in the American Medical Association, with no dues or other requirements except that each member pledge himself never to speak unkindly or in criticism of a brother physician to the laity except that physician be also present. Let us renew our vows and wear buttons to show that we mean to keep them.

If such a condition could be brought about we would be held in much greater esteem by our patients and neighbors. Whenever a physician is condemned, maligned or criticized by another physician, the ill-will engendered in the minds of the laity is not against the one physician but the class—individuals are forgotten and the profession is remembered as a whole. If I tell every one I meet that Dr. Pill is a rank physician; knows nothing of medicine and will stoop to any mean practice, the laity soon forget that Dr. Pill is a "poor doctor" and retain the impression that we are all "poor doctors" ready to stoop to anything.

Let's stop it; raise the standard. Can we get together at St. Louis and organize a club?

Yours, for "no knocking,"

W. T. WOOTTON, M. D., Hot Springs, Ark.

Editorial Note:—The foregoing is from the *Journal of the A. M. A.*, of August 7, 1909, and found its way to this office recently, being a contribution from Dr. W. C. Wooten, who asks: "Will you agitate-

such a scheme to the end that we may create a better general impression upon the laity, restore confidence in our profession and take away the foundation for so many pathies, religeo-cures, etc?" I'm afraid the doctor is a little too late with his spasm of reform in this particular line. I believe, however, that if the "regulars" will try the experiment "on the dog," that is themselves, that there will be no need to complain that professors of other pathies participate in this questionable pastime of knocking the other fellow. Let us know how the "Praise Heaven and Your Brother Club" succeeds, will you Doctor?

* * *

SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION.

THE SOUTHERN HOMEOPATHIC Medical Association is gaining constantly in membership and enthusiasm, and the coming meeting, which is to be held in Hot Springs, Ark., November 15th, 16th and 17th, 1909, promises to be one of the most enthusiastic and successful in the history of the association.

We have heard from many southern homeopaths, as well as friends from the north, who have signified their intention to be present and offered their assistance and hearty co-operation in the upbuilding of the cause of homeopathy in the South. On the other hand there are many who have ignored our circular letter of May 12th as well as personal letters, written by the president and secretary. Now, doctor, if you are one of the latter, will you not take the time to reply to this letter?

If possible, make your arrangements to be with us in Hot Springs, even if not sure that you can be there, assure us of your co-operation and interest in the cause of homeopathy by sending a line to the secretary and, if not a member, your application for membership.

We can hardly believe that past silence on your part means that you do not realize the necessity of organization if we are to maintain our rights and protect ourselves against unjust legislation; or on the other hand that you are no longer interested in homeopathy and its propagation in the Southland.

One important reason why homeopathy in the South is not what it should be is because the homeopaths do not stand together. Why do you send your surgery to an allopath when there are men in our school who can do it just as well? If

there is not a homeopathic surgeon convenient, get a good man to locate near you and send your special work to him. In doing this homeopathy will take the place it should. Let us stand for homeopathy, first, last and all the time. In union there is strength.

The officers of the Southern Association are working for the best interests of homeopathy in the entire South, not any particular section, and it will be gratifying to know that we have the support and co-operation of the southern profession, as well as any aid our friends from the North are willing to give us.

Information, regarding arrangements and transportation, will be found in the programme, which will be sent out some time in advance of the meeting. Anyone desiring the above in advance may secure it from the chairman of the committee, Dr. V. H. Hallman, Hot Springs, Ark.

We hope that you will favor us with an early reply and give the assurance requested above.

Fraternally yours,
WILLIAM A. BOIES, Secretary.

* * *

OPEN LETTER.

A MEETING OF PHYSICIANS and Surgeons interested in Scientific Clinical Research is called for Wednesday, October 27, 1909, at John Ware Hall, Boston Medical Library, No. 8 Fenway, Boston, Mass. The meeting will come to order at 10 a. m. and carry its sessions through Wednesday, and, if necessary, through Thursday and Friday.

The object of the meeting is:

First—To establish an American Association of Clinical Research.

Secondly—To establish Clinical Research on an incontrovertible scientific basis in hospitals.

Thirdly—To institute an American Journal of Clinical Research in which the work of members of the American Association and of others doing clinical research work in a scientific manner shall be published.

You and your friends are herewith cordially invited to participate in this meeting and in the proposed movement of scientific clinical research.

This invitation is extended to all physicians and surgeons whose interest goes beyond the immediate case work of ordi-

nary clinical societies; and it is hoped that the invitation will be accepted by all medical practitioners, irrespective of their present medical affiliations, who can appreciate the necessity for establishing on an incontrovertible scientific basis the certainties and limitations of the present practice of medicine and surgery before attempting to add to the already large and cumbersome field of medicine.

The American Association of Clinical Research is not intended to disturb the present medical affiliations of its members nor to interfere in the very least with the duties they owe and the privileges they enjoy by virtue of their affiliation with any existing national medical body.

The American Association of Clinical Research is to take cognizance of the fact that the clinic requires cold facts and conclusive methods, and upon these fundamental requirements, the structure and the work of the American Association of Clinical Research are to be built.

It is of the utmost scientific importance to establish conclusively all that is at present true in medicine and surgery, and only upon such proved knowledge to base any further advancement. The clinic deals with clinical entities and not, like the laboratories, with parts as entities. Therefore, clinical research differs, and must differ, from experimental laboratory researches. Clinical research must consider clinical entities, and when considering parts, it must consider them only as part, and not as wholes. All that subserves the object of obtaining and investigating clinical facts and principles belongs to clinical research and the laboratory is a part of the means of clinical research, but only a part.

The crux of the matter appears to be that experimental laboratory proof is not sufficient clinical proof. In order to advance in an irresistible line, clinical research must be based on a conclusive form or method of clinical proof. In experimental proof, we dislocate a part from a whole and attempt to prove the whole from the part, as though a dislocated part could always prove the whole. Or, we attempt to prove facts in one species by facts in another species, as though the two species were identical. For instance, the experiments made on animals to elucidate certain elements of fever bring out a fact of almost insurmountable difference between man and the lower animals, the fact that man has associated with the nakedness of his body a highly perfected power for regulating his temperature, a highly developed vasomotor system and a vast array of sweat glands, a characteristic complex of things which apparently no other species of animal life presents. Experiments made on animals

to prove febrile or other clinical phenomena in man, may be suggestive, but for obvious reasons cannot be conclusive. To prove observations in man, the observations must be made on man and not on animals. But observations on man even are not necessarily conclusive. Individual observations on man cannot be conclusive, because the same experience cannot be repeated, and when we prove by numbers, we compare similar but not identical experiences. Analogy is not conclusive proof. Identity alone is conclusive proof, but since, in medicine, identical experiences cannot be repeated, we must provide simultaneous identical experiences in order to have proof by identity. Clinical proof is conclusively established when all observations and experiments are made conjointly by at least two competent men, preferably of opposite ideas, at the same time. Conjoined critical observation and experiment, at the bedside and in the laboratory, as may be required, furnish simultaneous identical experiences, the proof proceeding on the principle that a whole can be proved only by the whole and not by dislocated parts.

These and other weighty questions await your assistance for a necessary solution. The benefit that will accrue, both to medicine in particular and to the medical profession and humanity at large in general, from a satisfactory establishment of scientific clinical research, can be easily surmised. Come prepared, yourself and your friends, to give to this matter your mature convictions and your personal assistance. Only from a critical interchange of critically acquired opinions, can we hope for clearness and for the clarification of the medical atmosphere now charged with confusion and indifference.

Your communication, indicating your interest and your expectation of being present at the meeting in Boston on October 27th, next, is eagerly awaited, and on receipt of the expression of your interest, further developments will be communicated to you personally in due time.

Please address your communications at the earliest possible date directly to James Krauss, M. D., 419 Boylston Street, Boston, Mass.

Yours fraternally,

JAMES KRAUSS, M. D.,
Chairman Comm. American Association Clinical Research.

* * *

THE TRUSTEES AND THE INSTITUTE JOURNAL.

TO THE CRITIQUE: Wonder what the Institute trustees are going to do about that Institute journal? Did you ever see such a weakling? The organ of the National Homeopathic

Medical Association! Heaven save the mark! If any member of the American Institute outside "the ring" can see anything creditable in our official organ I, for one, fail to see wherein lies his judgment. Some thirty journals, good, bad and indifferent, of three or four schools, come to my office, but this Institute journal, about which we heard so much at Kansas City, what a great organ it was to be, what it was to do for us and homeopathy, and all that, it is among the weakest and most uninteresting of them all. An official organ ought to have some ginger to it. It ought to stand for something, have something to say, hit out here and there for homeopathy and all that is helpful and progressive. But this journal is one of the most uninteresting and among the least forceful that I receive.

It is simply Dewey's old *Medical Century* under another name and cover, and since so much of his time is taken up "propoganderizing," as one of my neighboring country colleagues has it, and since he spends so much time in his college work in Ann Arbor, and in his large and lucrative practice, which I am told is one of the best in our school, he is not making as good a journal of it as he did of the old *Medical Century*, which I have taken ever since it was started.

Did you ever stop to think of Dewey's earnings? They must be tremendous. He gets \$2,000 a year as a professor at Ann Arbor; \$250 more as acting secretary of the faculty; \$2,000 a year as "chief propogander" of the Institute; \$10 per day while "propogandering" about the country; \$5,000 a year from the Institute for calling the old *Medical Century* the *Institute Journal* and allowing it to furnish all the matter for its reading pages; the advertising must come to \$5,000 more; and, besides this, if what we hear over the country is true, he has a practice in Ann Arbor and Michigan that is worth from \$15,000 to \$18,000 per annum. Sum this all up and our roving secretary of the Medical Council and field secretary of the Institute, and editor—by grace—of the *Institute Journal*, has a gross income of not less than \$27,500 to \$30,000 per year. Gee whiz! Who wouldn't be a professor at Ann Arbor, a distinguished alienist, field secretary, editor of an official organ and general "propagander" of homeopathy and things generally? Don't I wish I had been born in "Vermount"?

But it is none of our business what our alienist-professor-secretary-field secretary-general propagander, et. al., et. al., etc., gets, makes or receives, except that it is my business, and yours, Mr. Editor of THE CRITIQUE, to know what he gets out of the Institute treasury for calling the *Medical Century* the *Institute Journal*, and that I purpose bothering about!

That memorable and immortal journal committee knows about as much about journals as I do about raising pumpkins—or sheol! The chairman reported at Detroit that Dr. Dewey had come to the committee's aid. Wonder if Dewey lied when he wrote Fisher that Bailey had wired him to come to Chicago to see him and Cobb about the journal business, and that when he responded he found them up against it, hard pressed, in a position to be squeezed, or something of that sort! Did Dewey squeeze? Well, I guess "yes." He squeeze, and squeeze hard. Four hundred and sixty-six dollars a number for five years! All his "copy" furnished free! All the advertising clear! Two dollars for every new member for the Institute that he can get as general field propagander! Absolute control over the space of the journal, to put in what he wants to, to leave out that which he wills! (Guess we'll see Fisher's name right often these days, and Porter's, and Halbert's, and a few of those who do not altogether approve of the squeeze!)

If ever a body of men were buncoed, and if ever a body submitted gracefully to the bunco act, Dewey buncoed that body and their grace was charmingly sweet and simple. Talk about our "Teddy" hogging all the lions and elephants in Africa! Dewey hogged all the persimmons on the Institute's journal tree before they were half ripe. He caught Royal in the bud, Copeland, stuck up over his New York promotion, Bailey crazy to carry out his journalistic pipe-dream in some manner, Cobb hand in glove with his co-sanitarium promoter, and Sawyer still sick and not caring much of a red cent whether the journal went or didn't. And he squeeze a genuine "Vermont" squeeze, sure enough.

Wonder if the trustees will sanction the ill-advised and extravagant journalistic fiasco? If they do, well, they are not the men, "and one woman," their names imply. There isn't a journal in the school that won't do a score of times better for the Institute, speaking figuratively. Even the dear old Hahnemannian would doubtless make better figures than we have now. There is hardly a printer in the country who wouldn't jump at the chance for such a harvest, and we know our secretary, and an editorial corps from the officers or trustees of the Institute, could beat the present journal a mile in a two-mile dash.

* * *

Speaking right out in meeting, this matter is almost too serious to joke about. The interests of our profession are too seriously at stake. Homeopathy is hanging in the balance these days. Whether we care to admit this or not, it is true. Pity

it is, but true also. There isn't a doctor in all the great Middle West, or in any other part of our outlying territory, but that knows how precarious our position before the medical world and the public actually is at this moment. Our colleges all know it; our journals all know it; our societies, except in a few special instances, are painfully aware of it. There was a time when persecution spurred us on. Now we are not persecuted. There was a time when homeopathy was a popular fad with lots of people. Now Christian Science and osteopathy are the playthings of the masses. There was a time when homeopaths were proud to have the word on their cards and signs, and to be known of the people as followers of Hahnemann. Now some of our colleges have disowned us; only occasionally does a journal have the word at the masthead; but a small per centum of our everyday city doctors ever style themselves "homeopathic," and a great army of them seem to think the sobriquet a synonym for narrowness, bigotry, sectarianism and the "and-so-forths" that the old school used to heap upon us. The times with us are critical, and there's no getting away from the statement. We must have strength in our hour of danger. We need a journal that is a journal, no plaything in the hands of some half-way editor and his secretary, to do with it as they will—we to pay the bills.

The Institute has willed a journal. Now let the trustees give it to us. The journal committee hired some other fellow to loan us the use of his, at an extravagant rental, but this isn't the Institute's own *Journal*, never will be, never ought to be, doesn't stand for the Institute, isn't a credit to it, and the trustees ought to turn it down without any consideration and set the Institute out with its own official organ, and an organ, too, that will stand for us, that we can point to with pride, that we can say is *our* journal, not Dewey's journal nor any other person's journal, but our own.

No more makeshifts for me, if you please, and I know I have lots of backers who are disgusted with this first Institute effort.

Cut it out! Give Dewey his *Medical Century*, with the money we have already squandered in the venture, and let him run his own journal—while we run ours. If he is proud of it, let him wear a blue ribbon, but the mighty American Institute of Homeopathy deserves, and ought to have, and must have, if the trustees would have peace in the family and "Progress" as their motto, a mighty-sight better journal than the thing now called our official organ.

Yours in earnest,
JUST A "PLAIN MEMBER."

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

SOMETHING WORTH WHILE.—Commencing in this issue is the first of a series of articles from the pen of Dr. R. del Mas, of Centreville, Minn., upon the subject of "Our Women."

In this article Dr. del Mas, who has written much that has attracted unusual attention on account of his forceful and entertaining manner of presenting *materia medica* and other topics, will give the prominent points of differentiation between drugs suitable to the female sex.

This series will cover a considerable period and will be well worth preserving for future reference, as the author is one of

those careful exponents of true homeopathic prescribing who back their assertions with a thorough knowledge of the subject handled.

In our November number Dr. J. C. Holloway will begin a series of Ten Letters "To the Young Homeopath."

The special reference to age need not disqualify the older members of the profession from perusing the papers, nor will they be less benefited on account of their years of study and experience; no one is too old to learn, you know, and in these articles will be much to remind the old of some things they have forgotten as well as giving the younger ones the benefit of a thorough study made by the doctor whom I consider one of the best writers upon homeopathic topics in this country.

THE CRITIQUE hopes there will be a demand for these letters and believes there will; in which case we shall issue a sufficient number of reprints to cover all requests for the same.

I know of nothing that would prove of more benefit to the homeopathic physicians of the country than the use of these letters as a propagandistic medium and would suggest that it be used among their clients as such. It will do more to educate the laity than anything else.

We will furnish the same in lots of 100 for \$1. Send your orders to the Business Manager, Steele Block, Denver, Colorado.

M.

COLORADO HOMEOPATHIC SOCIETY.—The recent meeting of the Colorado Homeopathic Society was much more of a state meeting in fact, than has been held hereabouts in many years. The *state* was well represented, and, as a consequence, former political practices were relegated to the rear.

I had the pleasure of attending several sessions and am not compelled to take my information second-hand, as it were, and know that the utmost harmony prevailed throughout the entire meeting.

Many of the younger members of the profession were in evidence, and in cases where they participated in the program, their presence was particularly pleasing.

Quite a number of new members were added to the roll, and from the manner in which Treasurer Brown was accepting money, I am inclined to believe that the treasury is in a specially happy state of prosperity.

In all probability many American Institute members will pass through Denver next year on their way to the Los Angeles meeting, and while I do not desire to detract from the delightful

time our eastern friends no doubt anticipate at that time, it is to be hoped, that an effort will be made to show the visitors within our gates some of the glorious scenery, and give them at the same time a taste of Colorado hospitality, for which the state is famed both in song and railroad folders.

Many suggestions were advanced at the meeting in question, among which none received a more hearty support than that which Dr. Grant S. Peek presented, which was to the effect that the president-elect name a committee of propagandism; the duty, of course, being to tell about homeopathy. This was a wise move and met with unanimous approval.

The attendance was exceptionally large, consisting principally of out-of-town members of the profession. Dr. Sadler, the presiding officer, did so in a dignified and impartial manner, and his genial smile and promptness of action made many friends and admirers.

The election of officers occurred at the wind-up of the last day's session and resulted in the following selections:

President—Dr. S. S. Smythe, Denver.

First Vice President—Dr. L. E. Bartz, Windsor.

Second Vice President—Dr. G. C. Lamb, Canon City.

Secretary—Dr. C. M. Worth, Denver.

Treasurer—Dr. J. B. Brown, Denver.

Board of Censors—E. B. Swerdfeger, M. D., Denver; N. R. Wetlaufer, M. D., Cheyenne, Wyo.; L. E. Bartz, M. D., Windsor, Colo.; O. S. Vinland, M. D., Denver; J. P. Willard, M. D., Denver; W. J. King, M. D., Golden, Colo.

Administrative Council—James W. Craig, M. D., Ault, Colo.; P. D. Russell, M. D., Pueblo, Colo.; Walter M. Dake, M. D., Denver; N. A. Cramer, M. D., Loveland, Colo.; George E. Osborn, M. D., Denver; S. B. McFarland, M. D., Berthoud, Colo.; R. D. P. Brown, M. D., Denver. M.

JOURNAL OF THE A. I. H.—Elsewhere may be found an editorial from the *North American Journal of Homeopathy* concerning a contract made by certain individuals more or less prominently connected with the American Institute of Homeopathy.

Several such, among whom might be mentioned Doctors Dewey and Royal, seem highly elated over the fact that the former has an "iron-clad" document signed by the latter and several of his personal friends, giving Dr. Dewey a five-year permit to publish the *Journal of the American Institute of Homeopathy*, as well as allowing him the privilege of appropriating

the proceeds therefrom as his own particular pleasure may dictate.

Pudding, isn't it?

Someone has intimated that the homeopathic publication, designated as the *Journal of the American Institute of Homeopathy*, was patterned after the *Journal of the A. M. A.*, and that the purposes for which it was started were similar in scope; no doubt a majority of members of the Institute are laboring under this delusive understanding of the matter. I am sorry to say, however, that there is a trifling difference between the two, inasmuch as while the latter publication serves its society from every standpoint and adds materially to the money side of the matter, about the only obligation acknowledged by the former is that it has a contract, "and what are you going to do about it?"

On the sixth of the present month, in the city of Washington, D. C., will be held a highly important meeting; one in which every member of the A. I. H. is most thoroughly concerned.

In addition to the importance which attaches to it as the initial meeting of the Institute trustees since that organization was legally incorporated, the contract referred to at the commencement of this story will either be rejected or ratified.

The contract in question is between two unincorporated bodies. On one hand the journal committee of the A. I. H.; standing in an opposite position as to person, is the *Medical Century Company*, incorporated in 1895 under the laws of the state of Illinois, by Dr. C. E. Fisher, but which, on account of its non-compliance with the then existing laws of the state under which it was incorporated, and its absent-mindedness regarding the payment of dues, the said charter was revoked or canceled in 1902, therefore this so-called company has no standing in law whatever, consequently all those who may see visions of legal action against the Institute (incorporated) and the Medical Century Company (defunct) for damages to the latter or to W. A. Dewey (also unincorporated) need have no fears from that quarter.

Taking all these facts into consideration might it not be well to look into the reasons why members of the Institute, through their legally constituted representatives, the trustees, should not carefully consider the aforesaid contract and in case it bears even the slightest semblance of illegality or illegitimacy, completely repudiate it, so that at the very beginning all fuss and feathers may be forestalled from future deliberations.

The only party damaged by this proposition is the A. I. H. (incorporated) consisting of some twenty-one hundred homeopathic physicians of the United States and in this instance each individual member thereof should consider him or herself aggrieved to such an extent as to cause a protest so pointed to be presented at the forthcoming meeting as will make the trustees (their agents) sit up and observe the scenery.

As to the financial end of the game: Let us suppose, for sake of a very weak argument, that some trustee holds that Dewey *has printed the journal in good faith and will give bond to continue to do so.*

Well, what of it? Who, under existing circumstances, and at the Institute's price, would not?

I am informed upon reliable authority, in fact saw the figures, that one firm offered to duplicate the printing and mailing of the *Institute Journal* (2,500 copies) for \$170 per month. For this same service the Institute now pays Dr. Dewey \$466.66.

If the Institute *must go into the journal business*, which many members hold strongly to be a bad undertaking, let it issue *its own journal*, with the present secretary as editor and an editorial board from the trustees—several of whom have been editors—and *pocket the money from advertising, while paying the expenses from the twenty-five hundred subscriptions which are now donated to Dr. Dewey.*

There are certain trustees of the American Institute of Homeopathy from whom but little more may be expected in the way of loyalty than has already been displayed by them in-so-far as the “journal” question is concerned. One member, Dr. Boericke, is a minority stockholder in the Medical Century Company (defunct), but if he owned the entire plant no one would, for the briefest space, impute other than the highest motives or most loyal conduct from him when it comes to a consideration of this matter.

The trustees, as an organized whole, however, have this matter entirely in their hands, and it is to their integrity, honesty and far-sightedness, as well as to their absolute disregard of personal preference, that the future of the American Institute depends to a greater or less degree.

Since the foregoing was written I have received a very-much-to-the-point letter from “JUST A PLAIN MEMBER.” which is printed elsewhere; this plain individual is from Missouri and it remains to be seen whether the trustees “show him” or not.

M.

CORRESPONDENCE

CHICAGO LETTER.

Dr. R. L. Baird, Hahn. '08, has located in Dixon, Ill.

Dr. R. O. Howard, Hahn. '09, has located in Winfield, Kans.

The Ustion (Pi Upsilon Rho) fraternity are located at 3232 Lake Park avenue.

Dr. L. A. Vanderlind, Hahn. '08, of Wild Rose, Wis., was a recent Chicago visitor.

Drs. L. M. Griffin and H. I. Hammer, Hahn. '08, are both located in Toledo, Ohio.

Dr. J. L. Church, Hahn. '05, has changed his location from DeKalb, Ill., to Geneva, Ill.

The Phi Alpha Gamma fraternity chapter house is now located at 3346 South Park avenue.

Dr. J. B. Francis, Hahn. '08, has completed his term as interne in the Hahnemann hospital of Chicago.

The Alpha Sigma fraternity boys have secured the house at 3249 South Park avenue as their home for the coming year.

Dr. Roy L. Barr, Hahn. '08, has located at Holly, N. Y. Dr. Barr served a year as interne in the Hahnemann hospital of Rochester, N. Y.

The prospects are good for a large class of new students in the Hahnemann Medical College of Chicago this year. If you know of a possible student send him to the Chicago college.

An excellent course of lectures is just being completed at the Hahnemann Medical College. Although the attendance was not so large as hoped for, those who attended have been more than pleased with the lectures and those who failed to attend have missed a great treat.

On Friday, August 27th, Dr. George F. Shears, president of Hahnemann Medical College, died at his home, 2911 Prairie avenue. He had been confined to his home for several months past with a spinal cord disease. He was well known to the Homeopathic profession everywhere and the college and hospital have lost a loyal leader by his going.

The Chicago Homeopathic Medical Society, in conjunction with the Regular Homeopathic Medical Society held its first regular meeting of the season in the public library building Thursday evening, September 16th. The program was of unusual interest and consisted of President Aurand's address besides the discussion of several scientific subjects. There was a goodly attendance of both profession and laity and the meeting was pronounced a decided success.

Chicago, September 17, 1909.



Miscellaneous Matter



Send Us a Personal Item Occasionally

"Half the lies they tell about the Irish ain't true."

* * *

Straightened circumstances are the cause for many a man's crookedness.

* * *

Dr. E. N. Bywater, a prominent homeopath of Anamosa, Ia., has sold his practice and will hereafter devote his energies to the real estate business at Iowa City, Ia.

* * *

Brother Huntoon, of the **Iowa Homeopathic Journal**, is thankful that two physicians curtailed the duration of a recent illness to one week. Nothing like having good doctors.

* * *

An eastern writer sets up the claim that a Missouri man who married thirteen different women, is no criminal. That's easy; the chap's "nutty," that's all that ails him.

* * *

Dr. Leonard Freeman, the noted Denver surgeon, was elected president of the Colorado State Medical Society, at the recent meeting. Dr. Melville Black was re-elected secretary.

* * *

The Homeopathic Medical Society of the state of Pennsylvania was organized in 1866. The forty-sixth annual session was held at Scranton, the 21st, 22nd and 23rd of last month and was a success in every particular.

* * *

Dr. O. O. Sink, formerly of Shawnee, Okla., was an appreciated visitor at the editorial offices of **The Critique** the latter part of August. He was touring Colorado and the west in hopes of regaining his health. We certainly hope he will get his hope.

* * *

Miss Mary Anderson, daughter of the business manager of this publication, left Denver the 11th of last month for "Bradford," a school for young ladies near Boston. Miss Mary's many friends wish her every success in her school work and a pleasant sojourn in the effete East.

* * *

The Eclectic Medical Institute of Cincinnati, Ohio, gives no advanced standing to graduates in dentistry, pharmacy, veterinary medi-

cine, midwifery or **osteopathy**. A certain institution in Denver would be in a devil of a dilemma if it adhered to this rule.

* * *

It was a pleasure to meet Dr. W. E. Connett, located somewhere in New Mexico, at the meeting of the Colorado Homeopathic Society. Dr. Connett is one of the old Denver Homeopathic boys who has "made good" in the practice of a thoroughly reliable brand of the real article.

* * *

Dr. Edwin K. Dabney, Los Angeles, Calif., attended the meetings of the Colorado Homeopathic Society held in this city the 7th and 8th of last month and otherwise enjoyed himself with friends in his former home-town. Dr. Dabney, we are pleased to say, is doing well in his new location.

* * *

"They say" that there is some friction in the faculty of the College of Physicians and Surgeons, owing to a demand of a majority of said body that they have representation on the board of directors. This was formerly the Denver Homeopathic and will never amount to anything until it returns to old principles.

* * *

At one of the meetings of the State Medical, held at Estes Park the forepart of this month, Dr. Edward W. Lazelle gave it as his opinion that it would be well for practitioners to study suggestive methods in order that the medical profession could treat scientifically the cases that now go to the Christian Scientists.

* * *

Dr. W. Benham Snow and wife, of New York City, have been sojourners in our midst during the past month. Several social functions were given in their honor and the Doctor made a very interesting talk at the first day's session of the Homeopathic State Society, which was much enjoyed by all. The doctor's wife is also a physician.

* * *

In mentioning the accident to W. J. Hawkes, Jr., in last month's **Critique**, we made no comments whatever in hopes that the little lad was not the son of "our" Dr. Hawkes of Los Angeles. Since then we have learned, with much regret, that such is the sad fact and join with Dr. Hawkes' many friends in expressing our sincerest sympathy.

* * *

Dr. William A. Burr, Pasadena, Calif., formerly one of the prominent homeopaths of Denver, was paying much appreciated visits among his numerous friends in this city the forepart of last month. The doctor was looking well and gives evidence of the benefits to be derived from a sojourn on the coast. His many friends in this city were glad to greet him again.

Among the many out-of-town members attending the recent meeting of the Colorado Homeopathic Society none were in evidence or appeared to enjoy the proceedings more than Dr. Frederic A. Faust, of Colorado Springs. The good doctor was coming down with an acute attack of automobileitis when we last talked with him but no doubt, ere this, has had that popular complaint completely eradicated from his system and several dollars from his pocketbook.

* * *

The Iowa Homeopathic Journal remarks that "One can hardly refrain from remarking about the difference in the tone of the two editorials in **Progress**, one in June, the other in August, on the Institute Journal. It reminds us of the advertisements which read, **before and after taking.**" Say, brother, you are not familiar with the system of this sheet. It would like if possible to carry water on both shoulders. Wait until the journal question is settled for all time and then you will know which, the **before or after**, it stands for; but don't bet any money on either.

* * *

Among the many discussions indulged in by members of the Colorado Homeopathic Society, no one made a more logical presentation of a proposition than Dr. L. E. Bartz, of New Windsor, first vice president-elect, in his idea of dosage at the Wednesday session. While the doctor's deductions were not in full accord with the Organon, if one could eliminate the treatment of each individual case treating disease alone, his logic would have been almost perfect. As it was he held his audience in rapt attention; in other words "made them sit up and take notice."

* * *

From a letter which reached us too late to make mention of in our last month's issue, we learn that Dr. C. E. Fisher is at present located on a Burlington extension which is being constructed from Kirby to Shoshone. At the time of his writing he was at Thermopolis, Wyo., and was erecting two hospitals, twelve miles apart, one at either end of a box canon on the Big Horn river. One of his hospitals contained forty beds, while the other was a thirty-bed capacity affair. The work on which the 3,000 men were employed was very heavy and dangerous and as it was a sort of "rush order" it goes without saying that Dr. Fisher and his assistants will find plenty to do. He expects to be on the ground for several months, in the meantime, however, there will be something doing by the committee on transportation of the American Institute of Homeopathy, so that when that Los Angeles meeting is pulled off every one will have occasion to rejoice that such a man as Dr. Fisher had been selected to its headship. More power to Fisher and his capable secretary.



READING NOTICES



Of Interest to Everybody

PARKE, DAVIS & COMPANY'S "MANUAL OF THERAPEUTICS"—We wish to call attention to the foregoing work of inestimable value. It is a particularly well printed volume, handsomely bound in flexible leather and contains about 650 pages. The first thirty-six pages contain much that is of value to the average practitioner and comprises a complete index consisting of such interesting information as may be found in "weights and measures," "respiration at various ages," "pulse at various ages," "obstetric calendar," "notes on feeding" and such other valuable information much appreciated by the general practitioner as well as the specializing man.

The bulk of the book, however, is devoted to *materia medica*, pages 97 to 632 being devoted to this topic. By this it will be seen that the general practitioner will save much valuable time in consulting this book.

The first edition of this valuable work consisted of 40,000 copies and as any physician may secure a copy for the asking we bespeak for it a wide circulation.

PRECAUTIONARY MEASURES—As every physician has constantly under his care cases of either typhoid, malarial or bilious fever, it is well to remember that precautionary measures are possible, and if taken in time, much of the trouble with these cases is avoided. If it be true that the *materies morbi* of these diseases belong to the bacillus group, the remedies manifestly are an antiseptic and an antipyretic. As an intestinal antiseptic we have nothing better than salol. The consensus of opinion is in this direction. When we add the antipyretic and anodyne effect of antikamnia, we have a happy blending of two valuable remedies, and these cannot be given in a better or more convenient form than is offered in Antikamnia and Salol Tablets; each tablet containing $2\frac{1}{2}$ grains antikamnia and $2\frac{1}{2}$ grains salol. The average adult dose is two tablets. Always crush tablets before administering, as it assures more rapid assimilation. As the necessity of intestinal antisepsis in the treatment of this class of diseases is fully recognized, would not the scientific treatment of the conditions preceding them be the administration of the same remedies? Fortifying the system against attacks is the best preventive of them.

THE AFTER CARE OF SUMMER AILMENTS—It is probably the exception, rather than the rule, that a baby passes through its first two summers without at least one sharp attack of gastro-enteric dis-

turbance. In severity, such attacks vary from a slight bowel "looseness" and occasional eructation of nourishment, to a true choleraic diarrhoea, in which sudden and unexpected vomiting, rice water discharges, marked prostration and sunken fontanelles are the symptoms that precede dissolution. In all except the fulminant cases referred to, recovery ensues, if intelligent dietetic and medicinal treatment is instituted. In many instances, however, the considerable drain on systemic vitality, from the frequent discharges and the enforced cutting down of the child's nourishment, brings about a more or less anemic condition, and unless restorative measures are adopted, convalescence is apt to be slow and protracted. Ordinary hematinics, in such cases, are apt to do more harm than good, because of their irritant effect upon the stomach. Pepto-Mangan (Gude), however, is so palatable, readily tolerable and generally acceptable, that the infant can and will take it readily and without demur. Constipation does not result from its administration and the beneficial effects are noted promptly and decidedly, in the form of increased vitality, better color, a return of spirits and a better assimilation of nourishment.

A CONVENIENT CHLOROFORM PACKAGE—Much interest is being manifested in the chloroform dropper-ampoule marketed by Parke, Davis & Co., and which, in the opinion of a good many physicians and surgeons, is the most convenient and practical chloroform package that has ever been introduced to the profession. The new device is at once a hermetically sealed container and a perfect dropping-bottle that can be carried about in the emergency bag at all times in readiness for immediate use. It supplies in portable form enough of the anesthetic for one service—about thirty grammes. The desirability of such an individual package and its superiority over the ordinary amber, cork-stoppered bottle heretofore supplied is appreciated when one remembers that chloroform in broken packages rapidly deteriorates under the influence of air and light and becomes contaminated with chlorine decomposition products.

The dropper-ampoule is, furthermore, a very economical package, as loss by evaporation, spilling of contents, and deterioration are practically eliminated. The chloroform may be dropped directly upon the mask with ease and accuracy. The anesthetist has perfect control of the outflow and is enabled to regulate at his discretion the intervals between drops.

Physicians desiring further information relative to the dropper-ampoule are advised to write to Parke, Davis & Co. for their illustrated circular descriptive of the new package, addressing them either at their main laboratories, Detroit, Mich., or any of their branches.

VOL.
XVI

ORIGINAL ARTICLE

No.
11

Denver, Colorado, November 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath, by J. C. Holloway, M. D.

CONFIDENCE.

MY DEAR DOCTOR: Your very earnest letter of inquiry; of hunger and thirst for that knowledge which promises success; of pleading for the real secret of homeopathic cures, has been received. I take pleasure in trying to answer your various inquiries and imparting to you, as best I can, the *very gist* of true homeopathy as taught by Hahnemann and the marvelous cures which are possible under his doctrine. But to do this in a manner at all satisfactory to you and to myself, I shall have to promise you a *series* of letters. Hence, in this the initial one, I want to emphasize the importance of *Confidence* and the high sphere it occupies in the life and career of the successful homeopathic physician.

You say you are a graduate of _____ Homeopathic College and that you have practiced two years. Ah! The *practice* is what has opened your eyes to the fact that you still have something to learn. Fortunately I happen to know that the college of which you say you are a graduate, though labeled "Homeopathic," has not even one true, Hahnemannian Homeopath in its faculty. Professor _____ would constitute an exception were it not for that fatal weakness which he calls "personal liberty" and by which he licenses himself to diverge from Hahnemann's law whenever *He* thinks it expedient. So while it is natural for us all to cherish a personal interest and justifiable pride in our alma mater, in your case, my dear doctor, you have nothing to cherish.

Of course, I do not mean this as a reflection upon you, but upon the pretenders who gave you the passport to a *legal* right

to practice medicine, without the great pre-requisite, that one essential to medical success, namely, *Medical Knowledge*. You, like thousands of others, saw the label "Homeopathic," and, like the "spider and the fly" story, were led into their mongrel parlor and deceived. I, myself, had a similar experience. But, unlike the fly, you live; and you live to strive for that knowledge which made famous the names of Hahnemann, Boenninghausen, Gross, Dunham, Hering, Lippe, Wells, H. C. Allen, Kent and a host of others, because of the almost miraculous cures which true homeopathy has accomplished in their hands. And this spirit of endeavor upon your part; this disposition to say, "If they did it, so can I," is most commendable and praiseworthy. I congratulate you upon your future and assured success. But you must cultivate the true spirit of a *learner*. You must be willing to kneel at the feet of these homeopathic giants and say: "Help my unbelief!" That which made them famous as true healers in the true healing art, is precisely what you are lacking. Congratulate yourself that you are aware of that fact.

To know that you do not know, is victory half won. I venture the assertion that you never heard a lecture on the Organon in that college during your whole course; and it is as impossible for a man to be a homeopath without the Organon as to be a Christian without the Bible. How could such a school turn out a homeopath? That every seed bringeth forth of its own kind, is an eternal law. "Doth a fountain send forth at the same place sweet water and bitter?" "Can the fig tree bear olive berries?" So can no medical faculty, without the Organon, yield even one true, Hahnemannian homeopath. In having been turned out of a "Homeopathic" College, without homeopathy, or even the pure homeopathic seed which often springs up and matures in an isolated life, you are unfortunate; but in possessing the fixed determination to be just such a homeopath as was Hahnemann, Dunham, et al., and to make just such cures as they made, you are fortunate, indeed. To reach the goal of your ambition you will have to use just such instruments of cure as they

used, and apply them by the same, infallible, therapeutic law. Then you shall be a homeopath worthy of the name.

But here I am reminded that you say: "I have not announced myself as a homeopath, but just a doctor." Now, I wonder if you was hoodwinked into signing the by-laws of an old-school medical society and thus, over your own signature, deeded away your birthright for a mess of pottage! True, most anybody who is legally licensed can be "just a doctor!" but I never heard of a physician who *understood* homeopathy who was ashamed of the name. Remember, that whole scheme of signing old-school by-laws, agreeing to not be known by any "sectarian name" and posing as "just a doctor," is only another *kind* of a spider after the fly. And, by the way, this spider has caught more homeopathic flies than were ever caught by the combined tactics of the traditional school in all the history past. The reason is, most likely, that the majority of men have an unseared conscience, and those who have had the misfortune to receive their M. D. degree as you received it, soon awake to the consciousness that *they are not homeopaths*, and having within them a repugnance against sailing under false colors they accept the bewitching invitation to be "just a doctor." Now, I shall not exhort you here, for I know full well what you will do with such a proposition when you learn pure homeopathy. That alluring net never caught a true homeopath, and it is safe to predict that *it never will*.

In this first letter I shall only aim to cover a few points suggested by your inquiry, but I promise to notice all as we proceed and shall try to place before you the fundamental principles of homeopathy, the very foundation and gist of the system, in such a way that you may understand and embrace them.

The chief point I now emphasize is *Confidence*; confidence in yourself and in the agents you employ in order to cure; confidence in homeopathy and in its founder; enough confidence to believe what he says and to profit by his experience. Do you know, my dear doctor, that there are hundreds of so-called homeopathic physicians who never even read the Organon through—some who never saw it? They have blundered along in the footsteps of a mongrel preceptor, doubting, often denying the

power of medicines to cure, materialists as to the nature of disease and the agents of cure, possibly trying to apply the law of similars without the *science* of homeopathy, and knowing full well that they cannot cure chronic and complicated diseases. The fact is, such doctors do not even know for a certainty that they ever cure anything. They know acute diseases have a tendency to get well of themselves if the vital force is not over-powered in the process, but how a physician may know *to a certainty* that his remedies in acute troubles intercede in Nature's behalf, shorten the duration, prevent complications and *cure the patient*, is a knowledge they do not possess.

And yet the founder of homeopathy has left on record this information, so that the trained and careful homeopath may *know* in each individual case whether his remedies are curing or whether Nature, unaided, is doing the work for him. Such a doctor, of course, claims the credit of every recovery but is downcast, despondent and skeptical at every death. He has no knowledge, or science, or skill, upon which *Confidence* can rest; and the daily rounds of his professional life soon take on merely and wholly a *commercial* character, and he then attempts to convince the cloud of witnesses of his superior ability as a doctor, by the clap-trap appliances with which he fills up his office and the humming motor-car in which he drives at break-neck speed. If he succeeds in getting any considerable business by these methods, the tell-tale record in the clerk's office will convince an observing public that "there is not much difference between Homopathy and the old school after all." Thus homeopathy must suffer reproach because of her pretended friends, who, in fact, are her bitterest foes. They have no confidence in their medicines because experience has taught them that their failures outnumber their cures, and because upon a second sober reflection they doubt whether they ever effected a cure; and they have no confidence in themselves because they are conscious of the fact that they work without law. They prescribe this for Jones because it is supposed to have cured Smith—and they finally learn it will not cure Jones; then they know not what to do.

When a physician loses confidence in his medicines, that in itself is an exhibition of his ignorance of their power and of his inability to prescribe them.

CONFIDENCE.

Confidence in yourself in being able to detect those signs and symptoms in a given case of sickness which constitute *the image* of the disorder; and confidence in your ability to find the medicine which, in its pathogenesis is the *similar*, and hence the curative agent. Confidence in the *Law of Similars*; in the fact that each medicine will cure when prescribed in a case of natural sickness which is similar to the artificial sickness which it has produced, if prescribed singly and alone and upon the plane of the patient's susceptibility.

So you see the confidence of which I speak is built on *knowledge*. Knowledge that comes from definite sources and through specific channels. Knowledge which can only be acquired at the feet of the master and those who have faithfully and loyally followed him.

It is a well-known fact that the more experience the so-called "regular" has, the less confidence he places in drugs. Old-school physicians soon learn to direct their energies toward surgery, because they say it is a "science." The result is that the number of hospitals constantly increases beyond natural demands, and thousands of patients who are merely subjects of scientific prescribing, and not of surgery at all, are mutilated to satisfy the ambition of would-be surgeons and meet the increasing expenses of needless hospitals.

This is all because thousands of young men are pushed into old-school and mongrel colleges every year, where their minds are filled with prejudices against Hahnemann and his doctrine, only to learn later on, as you have learned, that medicine as they received it is the most unblushing fraud ever imposed upon a sick public. But such, my dear doctor, need not be your future experience. The longer true homeopaths live, the more experience they have, *the greater their confidence*.

I note your statement that you "have no confidence whatever in high potencies." I am not surprised at that. That is

precisely what I said, to Professor J. T. Kent, when I applied to him for homeopathy as you have applied to me. His answer was: "*That is your ignorance!*" As time proved his statement to be true, I say the same to you: "*That is your ignorance!*" I have shown you that confidence rests on knowledge; and as you have no knowledge of the high potencies, could not define the philosophy that gave them birth and do not know how to use them, why should anyone expect you to have confidence in them? That philosophy you will have to understand, however, ere you become a successful homeopathic prescriber. And I shall dwell at length upon this point in this series of letters, for on this rock you must stand if you stand at all. Out of the philosophy which underlies pure homeopathy is evolved dynamization of drugs as one of its essential features. I shall try to make this point plain in this series. But I also note your astonishment at your multiplied failures, and your amazement at the fact that you cannot make a *single cure* such as those credited to Hahnemann, Dunham, et al. Then you itemize by saying you "cannot cure warts, skin eruptions, haemorrhoids, ague, gonorrhœa, syphilis, etc., merely by administering the indicated remedy internally."

I once heard Mrs. B. say to her husband, who was a local preacher, and who was relating some of his experiences: "Well, Brother B., you are not a preacher to hurt." So I will say to you, my young doctor, until you can make such cures by "merely administering the indicated remedy, internally," you will never be a homeopathic physician to hurt!

I once sent for a dietetic work that I might know how to feed the sick. When it came I anxiously devoured its pages, only to learn that its author gave the desired information by telling what *not* to eat. So in a brief way I might give you an insight into pure homeopathy by telling you what you should *not* do:

You should *not* prescribe crude medicines. You should *not* prescribe more than one medicine at one time. You should *not* prescribe for the name of the disease, but for the patient. You should *not* decide that any given drug will be the next indicated remedy *a priori*. You should *not* permit the diagnostic name to

influence your prescription. In any given disorder, diarrhoea, say, you should *not* allow any medicine to fool you this time because it was successful in treating diarrhoea in another patient. You should *not* use a hypodermic. You should *not* prescribe mineral waters. You should *not* use local applications in inflammatory rheumatism. You should *not* prescribe salves and ointments in any form of skin eruption. You should *not* use local applications in treating haemorrhoids. You should *not* feign to practice homeopathy and at the same time *appear* to give large doses. You should *not* educate your patients to the idea that you are selling medicines, by giving them each a four-ounce bottle of colored water. You should *not* repeat the right medicine so continuously that the vital force has no opportunity to react. If the selected medicine fails to bring relief, you should *not* conclude that you can force Nature by giving it in a cruder form and larger quantities. You should *not* imagine that disease is some material thing which by heroic doses may be routed like a rabbit from a brush heap. You should *not* conclude that the curative power of a drug consists in its material elements, for the Father of Homeopathy has distinctly told you that is *not* true. You should not prescribe a cathartic for constipation. You should *not* inject crude strychnine to stimulate the heart. You should *not* prescribe coal tar preparations for headache. You should *not* recommend vegetable laxatives while treating a patient who suffers from constipation. You should *not* copy after old-school methods thinking it will popularize you. You should *not* pretend to be one thing when you know you are something else. You should *not* forget that your high and only mission is to heal the sick. You should *not* fail to convince yourself that there is but one infallible way to cure —the homeopathic way. You should *not* imagine that you can give the wrong medicine strong enough or in doses large enough to cure. You should *not* permit a patron who is able to pay for your services to owe you longer than three months—he may forget what he is paying for. You should *not* cauterize a chancre, but cure from within out. You should *not* use an injection in any case of gonorrhœa. You should *not* inject anti-toxin for diphtheria, but rely upon the indicated potency according to the

expressed image of the disorder. You should *not* vaccinate any human being externally, as if there were no better way. You should *not* treat leucorrhœa by injections or tampons.

Much might be added to the foregoing list, but let this suffice as a few hints on the "*nots*." They suggest some of the causes of homeopathic failures. I am much gratified that you have expressed a desire to become a *true practitioner of the healing art*, and in my next I shall call your attention to the *four* prerequisites, according to Hahnemann, necessary for the realization of this high and commendable ambition. And in the series which I have promised *the Key to Successful Prescribing* shall be brought out, simplified, and made clear to the mind of any physician who wants to know. I use the word "*Key*" as a symbol of power. Its function is to *bind* and *loose*. Any physician who has the power to bind men in health, or to so instruct, advise and prescribe that health may be perpetuated; and he, who, on the other hand, has the power to loose men from disease and save them from premature graves, has the key to successful prescribing. This ability, this power, consists of *knowledge*—knowledge of a philosophy, a science, a therapeutic *law*. This knowledge I shall try to impart in a definite, clearly-comprehensible manner, so that he who *wills* may grasp it and apply it in his daily practice.

We live in a great age, surrounded by great men. Some are distinguished as orators, some as scientists, some as railroad kings, some as leaders of great political parties and some as discoverers of the north pole; but there is no man in the world quite so eminent; no mission so exalted, and no work so practically scientific as that of the conscientious physician who is master of the science, the art and the philosophy of extinguishing disease, and filled with the firm conviction, the enthusiastic impulse and the positive certainty that *he can save a human life*.

Galesburg, Ill.

THE ROUND TABLE

PROGRESS OF HOMEOPATHY AND THE AMERICAN INSTITUTE.

THREE WAS perhaps no truer utterance at the Detroit meeting of the American Institute of Homeopathy, than one made somewhat as an aside. It was to the effect that the American Institute does not represent all of homeopathy in this country and its membership is far short of comprising all of those practicing homeopathy. The occasion of the remark was the discussion of the journal question and the relation of the journal of the Institute to other journals publishing literature on homeopathy.

This fact was emphasized, however, in the proceedings of the various scientific bureaux. All of homeopathy certainly was not represented at these sessions. As we followed the discussions and the prepared discourses, watching everywhere for evidences of the principles and their applications, it was evident that homeopathy had frequently knocked in vain.

The parliamentary conduct of the business session was carefully guarded by alert observation. Especially the discussions of the journal and the incorporation business were conducted, for the most part, in spirited yet dignified routine. In many of these discussions, the intent to protect and maintain the rights and privileges of the homeopaths and to afford all opportunity for the advancement of homeopathy in teaching and in practice was emphasized. Despite all this there came repeatedly the evidence that too frequently these same ardent upholders of the profession miss the finest points of homeopathy itself in comprehension of its scope.

Were one not thoroughly grounded in the principles and familiar with their provinces in practice, his assurance and mental equilibrium might easily be toppled over and lost in the fray, as one and another suggestion of doctrine is assailed and chal-

lenged, as though no more stable than the experimental, unproved, specific tests for diagnosis.

We hear the assertion that the test for typhoid, which is, by some, counted final, may not be possible in some undoubted cases of typhoid; that the diphtheria bacillus may not be present until very late in the course of the disturbance, or, where no diphtheria exists, may be found easily, etc., etc. As easily do they dispose of the salient pillars of the doctrines, because in their experience they have failed to observe their demonstrations, whereas close investigation reveals that the critics, themselves, do not comprehend the actual method of applying the particular doctrine they would discredit.

In place of the fundamental doctrines, or any portion of the classic tenets being discussed, under the head of homeopathic philosophy, the application of undefined homeopathy in various diagnosed conditions is considered. This was the first of the bureaux on the program. The last one was *materia medica*. From first to last, in some form, in nearly all the sections, the subject of opsonic index and serum treatment with opsonins was discussed. It appeared that, for the time, all the philosophy of Hahnemann had been neglected to push to the uttermost this theory of curing the sick individual by feeding the tissues a pabulum prepared from the sort of bacteria that are found therein, that these bacteria may be devoured most easily and thus the patient be cured.

Comprehension of the classic conception of the dynamic nature of disorders, of the careful consideration of the individual, in selecting the curative substance and acquaintance with the action of the host of proved remedies, for selecting that most similar to the individual image of disorder was certainly, to these laboratory enthusiasts, obscured.

There were occasions when it was evident that physicians who had been trained in colleges supposed to teach homeopathy and, from them, sent out to practice as disciples of the great master, expressed a desire to know what would be the method of procedure and what would be the results obtained by those adhering to treatment with homeopathic remedies, according to the principles. This sort of query came forth as an indefinite

interest, rather a curiosity, than desire for useful knowledge. That there was some interest in homeopathy, pure and simple, cannot be denied. The amazing fact is that in such an organization there was such strong lack of knowledge of what is homeopathy and how to apply it. Individuals in private conversation did not hesitate to affirm their conviction that careful, individual prescribing is undoubtedly effective, but is too much trouble, or beyond their comprehension to grasp. They also admitted total ignorance of the knowledge of the contents of Hahnemann's writing on chronic diseases. Others, in strong terms, denounced as foolish and neglectful of the patient, any attempt to treat serious illness by the use of high potencies.

For the above reasons, the discussions in the various bureaux largely turned to other lines, fads and experiments, with occasional sprinkling of the expression of individual opinions as to whether the present lack of purity in homeopathic practice is due to the colleges, to the doctors who send their students to the colleges or to the demands of the public. To sum it all, failure to grasp the law of similars in its deep significance and the contributory doctrines in their relation to it has resulted in following will-o-the wisps presented by those who stumble upon rays of truth and fail to perceive the complete light though they may recognize the similarity to that of the Master, Hahnemann.

In strong contrast to all this uncertainty, questioning, ignorance of the law and failure in results, was the evidence obtained on a visit to Chicago, to one who has steadfastly followed the law, studied and practiced according to the doctrines. The teacher whom most of you heard and respected a few years ago, has not stood still nor digressed, but has spent his energies in the direction which Hahnemann pointed out and by persistent contemplation and investigation in the application and development of the classic doctrines, he has accomplished results that are marvelous and beautiful.

Deep disorders, advanced to ultimate expression in tissue changes, which, ten years ago, no one had checked at such advanced stages, he has, by careful selection of remedies according to symptom image, been able to dispel, with consequent restoration of vigor and activity. Records are kept in his office

of strange and peculiar forms of disorder turned to order by the homeopathic remedy. Cancer, insanity, nephritis, tuberculosis, neuritis, hysteria, have their counterpart in our remedies and thereby are subject to the power of our wonderful law of cure. Deeper and fuller comprehension of the action and relation of remedies has also resulted from constant study and application of them in the line of the law.

The inevitable conclusion is therefore presented that success in our field comes from thinking, living, working, in accordance with the law; and failure comes in proportion as the law and its corollaries are renounced, denounced and neglected in favor of other, contrary or unrelated visionary theories. Those who rest secure in comprehension of doctrines of homeopathy have the firmest foundation and most precious jewel for use to the sick and peace for their own refreshment.

JULIA C. LOOS, M. D., Delegate.

Report of the American Institute Meeting to the Hahnemann Round Table of Philadelphia.

THE CAUSA OCCASIONALIS.

IN WESSELHOEFT'S Fifth Edition of the "Organon," Paragraph V., Hahnemann says: "The physician in curing, derives assistance from the knowledge of facts concerning the most probable cause of acute disease, as well as from the most significant points in the entire history of a case of chronic disease; aided by such knowledge, he is able to discover the primary cause of the latter, dependent mostly on a chronic miasm."

In Paragraph VII.: "In a disease presenting no manifest exciting or maintaining cause (*causa occasionalis*) for removal, nothing is to be discerned but symptoms. These alone (with due regard to the possible existence of some miasm, and to accessory circumstances) must constitute the medium through which the disease demands and points out its curative agent."

In the footnote to this paragraph he continues: "As a matter of course, every sensible physician will remove such

causes at first; after which the illness will generally subside of its own accord. He will remove from the sick room flowers that may produce faintness or hysteria by their strong exhalations; he will extract irritating particles causing inflammation of the cornea; reapply to a wounded limb a bandage threatening gangrene, too tightly applied; he will avert the danger of a hemorrhage, by exposing and tying the wounded artery; he will endeavor to expel Belladonna berries from the stomach by emetics; extract foreign substances that may have penetrated the apertures of the body (nose, oesophagus, rectum, vulva), crush a calculus, and open the occlusion of the anus of a new-born child, etc.,” showing that he had a lively appreciation of the “*causa occasionalis*.”

In recently going over some letters, records and papers of the lamented Lippe, given me by one of his executors, in the hopes that they might prove of some use to the cause of pure homeopathy, I came across a letter from Dunham, written in his fine, copper-plate hand; a letter in which he expresses in his usual clear, analytical way the tendency of the homeopaths of that day and generation to neglect the observance of these precautions of Hahnemann. It seemed to me to be a plea for greater care and closer observation in the making of the anamneses; for the more active exercise of all *five* senses; for the more minute investigation of objective symptoms; and a protest against the carelessness of accepting only those which were subjective.

To the careful student of Homeopathy it is easy to perceive the causes which would result in such conditions. Our Hahnemannian patriarchs, zealous proselytes from the ranks of the dominant school—although realizing the weakness of the old and the superiority of the new method—continued to use the best tools of allopathy: diagnosis and hygiene; while depending entirely upon the Law of Similia for the selection of the curative remedy. In their discussions, whether written or oral, attention was called to the wonderful success resulting from the application of the newly-formulated law, but part of the process, preliminary to its application, was neglected as common property, and entirely overlooked by those coming later. We, of the present genera-

tion, hating anything which smacks of heterodoxy, when studying the records of the old masters, can easily fall into the error of thinking they did not use all of the weapons at hand; and, failing to read between the lines, do not, ourselves, use these potent means. The "scientific" (?) branch of our school in its search for the materialistic and desire for "recognition," on the other hand fails to take proper cognizance of that "spirit-like dynamis, the vital force." For the good of our patients and the conservation of our best uses it behooves us, as conscientious Hahnemannian physicians, to make neither mistake. We do, as strict disciples, recognize the importance of "eye strain" and improper plastic conditions; of unhygienic living and adverse psychological environment; but does our duty to our patients end here?

It has been my fortune, or misfortune, to have had brought home to me the possibility of easily making the mistake Hahnemann warns us against. Recently, in looking over the records of some of my cases that seemed to get only so far, notwithstanding all the care and study I gave them, I was interested to find a history of some traumatism, followed by long-continued tenderness or pain referred to a more or less circumscribed area along the spinal column: they were conscious of their backs. This led me to make physical examinations of these cases the next time they came into my office, with the result of finding, in every case, a mis-alignment of the spinous processes of the vertebræ, curvature; or, as Da Costa has so aptly expressed it, "sub-luxations." These "sub-luxations" involved from one to four, five, and even, in one case, eight vertebra; covering or divided between the cervical, dorsal and lumbar regions; together within the dorsal region the costal articulations. No region seemed to be involved, to the exclusion of the others; but my experience has since been that the greatest number includes the occipito-atlantal articulation: owing, perhaps, to the scantier musculature of this region and the ease by which distant shocks are transferred to it.

Resulting reflexive symptoms vary in their nature, intensity and importance, according to the nerve plexi or gangliæ involved, or impinged upon. The intensity is not always com-

mensurate with the amount or degree of sub-luxation, but rather upon the center involved: e. g., a slight lateral displacement of the atlas or axis may produce more serious and uncomfortable symptoms than a much more marked sub-luxation in the dorsal region; even to the extent of a compensated uni- or bilateral curvature. We all are familiar with cases of the latter; long standing without any apparent discomfort; and escaping notice until attention is accidentally attracted by the posture of the unconscious victim. So we cannot always depend upon the macroscopic appearance. On the contrary one of the most serious cases had, apparently, only a slight degree of lateral slipping of the atlas; but the resultant interference of the afferent and efferent nerve impulses threatened the reason and the life of the patient.

This sub-luxation of the atlas is most difficult to discover, owing to the vertebra being minus the spinous process; but a sound knowledge of the anatomical relations of the parts, coupled with the strict attention to detail, such as many of our Hahnemannians observe; and an easily acquired digital education, will enable anyone to discover this important lesion. In the case mentioned above, the replacement of the bones in their correct anatomical position was followed by an early and brilliant result of the homeopathic remedy, whose action was evidently prevented by the displacement.

It may be argued that I am promulgating osteopathic practices. This I deny. It is as much "common sense" as it is to "remove irritating particles causing inflammation of the cornea . . . expel Belladonna berries from the stomach by an emetic . . . crush a calculus, etc., " such as our venerated founder enjoins. There is a vast difference between the *principles* of osteopathy and the *practice* of the osteopath; as I shall show.

In looking to the so-called (for want of a better term) spinal lesions as a "causa occasionalis" for the failure of our homeopathically indicated remedy to act, we must not lose sight of two important factors: these same lesions, or sub-luxations may be *primary* or *secondary*; causative or resultive; and here

the homeopathic physician and the osteopath immediately part company.

Under *primary* causative lesions we can easily differentiate two classes: active and passive. Under active we place traumas, direct blows, strains, sprains, torsions, jars, etc.: Passive posture, manner of standing, lying or sitting; both of which cause direct results upon the peripheral organs supplied by the nerves thus involved. The *secondary* or resultant symptoms may be somewhat harder to distinguish, but they are easily confused if this arbitrary distinction is not constantly borne in mind, e. g., a patient sits by an open window and "takes cold," whatever that may be, or mean. Soon we have a spinal "lesion" coming on: wry neck; stiff, "rheumatic" shoulder; a lumbago; or what not. This if not attended to will, through the constant excitation of the muscles, continued contractions and resultant pressure on the nerve ganglia, cause reflexive symptoms in distant organs supplied by these nerves; or else through the constant pulling of the excited muscle cause a slight sub-luxation of its spinal attachment, especially if the opposing muscles are slightly relaxed, as is so often the case. These same conditions may obtain conversely if the muscles are relaxed, allowing the opposing muscles to exert a stronger force. This is not a causative but a resultant "lesion" and as such can be entirely controlled by the indicated, homeopathic remedy. Any other treatment would be absolutely wrong and harmful, as it would be removing the *results* of disease.

This differentiation is not recognized by the osteopath; all lesions are lesions to him, and as such must be removed. If there is any gastric disturbance, from a slight "indigestion" to a severe "gastritis" or "gastralgie," he looks for (and finds) a hyperesthesia somewhere between the 4th and 8th dorsal vertebra, which must be "treated." The amount or degree of hyperesthesia depends upon the severity of involvement of the peripheral organ. In the same way the lungs show trouble between the 7th cervical and the 8th dorsal vertebra; the heart between the 4th and 5th dorsal; the ovaries between the 10th and 12th dorsal; the uterus, the 5th and 6th lumbar. So on. All of the organs have their "centers" along the spine; and a

marked degree of control of the organ can, undoubtedly, be exercised by the excitation or inhibition of its corresponding "center." Even "chills" have their own centers—7th, 8th and 9th dorsal.

Parenthetically let me mention, right here, that "hiccough" can be quickly suppressed by pressure on the phrenic nerve as it crosses the scalenus anticus muscle, opposite the 5th transverse cervical process, provided the pressure is firm enough and continued only so long as to inhibit the action of the nerve. Also that severe cases of labor may be controlled by firm pressure on the clitoris. Such procedure does not seem to interfere with the expulsive force of the "pains," but, to use a Hibernicism, causes the pain to be less painful.

For a long time it was my custom to send to the osteopath for "reduction" those of my patients in whom I found these primary causative lesions; as I fully realized what damage could be done by a clumsy, inexperienced operator to the exquisitely sensitive and highly important nerve filaments where they escaped from the cord; and how easily it would be to cause an increase in just the trouble I wanted to relieve. It was not long, however, before new conditions and complications confronted me, and I was called on to figure out why it was that Mr. A. or Miss B. were promptly put in to condition so that the indicated remedies took up their curative action again and the case progressed in an orderly manner, along the line of the "three directions"; and Mrs. X. or Mr. Z. not only did not get better, but new, and perhaps increasingly serious symptoms came on and the patient got steadily worse. Change of operator did little, if any, good. After a careful study of the so-called osteopathic "principles," covering a quite respectable bibliography, I went back to my amneses again, with the following results:

In those cases where the results were quick, sharp and brilliant the conditions obtained such as I have outlined under the heading above, of primary lesions. Less qualified successful results were obtained in cases comprising a combination of the primary and secondary. Of these the best were accomplished when I succeeded in getting my patient away from the "bone-handler" before he had found too many things requiring "ad-

justment." The indicated remedy took up the work where he left off, with results that were satisfactory to me and the patient. Those cases in which the "treatments" were failures (or worse) comprised those of the secondary class; cases who should not have been referred had it not been for my ignorance of the sharp differentiation required. But when I found that it was results of disease and not causes he was removing, and that he could not see any difference, as they were all "lesions," I soon called a halt, and was required to find a substitute.

It is not within the province of this paper, inadequately expressed and written under pressure of much delayed work, to go into the details of how I gradually acquired the requisite technique for my modest needs in the reduction of these lesions which are more frequent than is commonly believed. It has been an interesting study and has resulted in a re-burnishing and a refurbishing of a rather rusty anatomical armamentarium; and it has also enlarged my knowledge of "what is curable in disease." Neither is it desirable nor necessary for me to urge the study of osteopathy on our members, but it is my earnest desire to call attention to the mis-alignment, displacement or sub-luxation of the vertebræ as a "causa occasionalis" to be reckoned with in making up the "totality of the symptoms," feeling sure that such attention and recognition will result in more favorable results to those who consult us as strict, honest followers of Hahnemann, Hering, Lippe and Kent, in the application of the law of the "Similia."

J. H. THATCHER, M. D., H. M.

2008 Chestnut St., Philadelphia.

THE DOCTOR'S BILL.—Occasionally some doctor will send in an extortionate bill, but the general run of them do not charge a cent more than their services are worth, and the bill should be paid promptly and ungrudgingly. The *Medical Standard* puts the case in a nutshell: "If you don't want to pay the doctor don't send for him."—*Exchange*.

S E L E C T E D

DR. SAMUEL S. SMYTHE, PRESIDENT.

THE COLORADO HOMEOPATHIC SOCIETY did a good thing for homeopathy in Colorado and the West when it selected this sturdy defender of the cause for its president for the coming year. Twenty-four years ago he served the society in this capacity, and from that time to the present he has been a busy physician and a loyal champion of the faith. The doctor's long and varied experience and his well-known tact and good judgment is sufficient foundation for the expectation that the interests of the cause and the policy of the society will be wisely managed during his administration. We wish the new president large success and we offer the pages of our journal for his use at all times.—*Progress.*

ALLOPATHY—HOMEOPATHY.

MANY PERSONS, including some physicians, have an idea that the words "allopathy" and its derivative "allopath" are terms of obloquy, but such is not the case. "Allopathy" stands for as clear-cut a therapeutic principle as does "homeopathy." The first-named treats diseases by opposites, the last-named by similars. If a man had his ear frostbitten and the physician were to bathe it in hot water the treatment would be allopathic; if he were to treat it with cold applications, though of a lesser degree of cold than that causing the injury, that would be homeopathic. The allopaths, to be sure, do not treat frostbites with hot water, but they do treat other diseases on precisely the same lines as the application of hot water would be to a frosted ear. If a man has a diarrhoea the allopathic principle is to give something that will "bind" the bowels, which is about the worst thing that could be done. The diarrhoea is an

operation set up by Nature to relieve the system. If the cause is bad food, it hastens its exit; if an inflammation there is more chance for recovery if the bowels move as they do in diarrhoea than though they were artificially bound as is done by an allopathic medicine, an act that does not touch the cause of the disease. So in the other disease. No; allopathy is not a term of reproach but it is a principle in the use of drugs that the patient is much better without.—*Homeopathic Envoy.*

LOS ANGELES, CALIFORNIA, JULY 11-16, 1910.

WEARY WILLIES AND PESSIMISTS never get anywhere, and there's a reason. When a man goes on a job someone or something is going to get "done," and it's always a source of great satisfaction to see the right man on the right job. When President Ward appointed Dr. Charles E. Fisher chairman of the transportation committee he couldn't have made a better choice. This is demonstrated by the work the committee has already done. There was no waiting until the last hour—no "Oh! Let George Do It," and when one reads their plans for transportation, even at this early date, he likewise plans to take advantage of the luxury and comforts to be furnished. It looks as if it were to be one grand and glorious outing, the long trip is to be shortened by its attractions and the men of the West will give us the time of our lives. Hospitality is in every fiber of their make-up and they are just bubbling over waiting for the time to come when they can show their good will. We believe it will be the most enjoyable meeting the Institute has ever held. It will be an opportunity to visit the West under such pleasing circumstances that we cannot well afford to remain at home. Let us show by numbers that we appreciate the efforts of our sturdy brothers of the Golden West.—*Medical Counselor.*

HOMEOPATHIC REMEDIES FOR THE LYING-IN PERIOD.

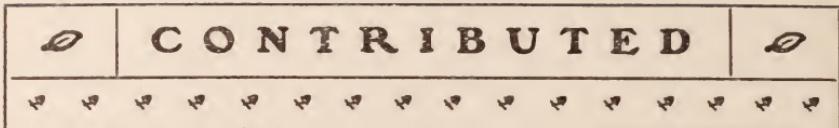
IN EACH and every case, even if perfectly normal, I give aconite 2x every hour while awake for at least twelve to eighteen hours or even twenty-four hours if there is any so-called fa-

tigue fever. For this is too early to have fever due to infection. You can tell how long to give aconite by the condition of the skin and the character of the pulse. These are much better guides than the temperature. The temperature may, during this time, reach 99 1-2 to 100 within a few hours after labor, but, as already stated, this is simply the so-called fatigue fever and is very promptly controlled by aconite. When the pulse drops below 90 and the skin is moist, discontinue the aconite and give arnica 2x for the next twenty-four hours. This remedy will control the sore and bruised feeling and alleviate the "after pains" to a marked degree. After arnica I give belladonna 3x for a week or ten days unless the breasts are too hard, in which case I give bryonia instead of belladonna, and in hundreds of cases have I seen the breasts soften under its use and mastitis prevented. Of all remedies in the *materia medica*, belladonna produces the most marked benefit in relieving the engorged and congested condition of the pelvic organs. This is true in all cases as well as lying-in women.

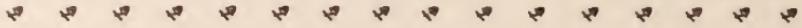
For profuse loss of blood after parturition, we have a few sheet anchors upon which we rely in the order of their importance. They are: crocus, ipecac, sabina, trillium, secale and ustilago. Do not depend too much upon the fluid extract of secale. In some cases accompanied by marked gastric symptoms hydrastis will be of great help.

For sore nipples we have such remedies to rely upon as croton tig., graphites, mercurius and silica, and above all things in those cases do not forget Friar's balsam.

For unwholesome or abnormal secretion of milk that does not agree with the child we receive marked benefit from such remedies as aethusia, causticum, belladonna, bryonia, dulcamara, rheum, rhus tox, pulsatilla and silica. For scanty supply of milk we have such remedies as aconite, agnus castus, belladonna, bryonia and causticum.—C. B. KINYON, M. D., *New England Medical Gazette*.



C O N T R I B U T E D



THE SETTLED QUESTION.

TO THE MEMBERS OF THE AMERICAN INSTITUTE OF HOMEOPATHY: The controversy which has found expression from our homeopathic journals has now been satisfactorily concluded.

The first called meeting of the Board of Trustees under the constitution adopted May 31, 1909, was held at Washington, D. C., at the New Willard Hotel, October 6, 1909.

The organization of the board into various committees will facilitate effective work.

Interest centered about the "Journal" question. Free discussion for several hours developed the idea of terminating the contract held by the Medical Century Company.

In conference a committee of the trustees with Dr. W. A. Dewey, arranged the terms of the annulment, which proved acceptable, and the only possible solution. By the terms of the release, the Institute is at liberty after January 1, 1910, to publish its own journal, restricting its advertisements to those strictly homeopathic, excluding sanatoria and private hospitals. The trustees recognized the financial and moral obligations involved and arranged with the publishing company to retire for reasonable consideration to cover loss to the publisher. The financial aspect for further continuance of the Institute as heretofore, made it absolutely necessary that a termination of the contract should be effected.

The trustees passed a resolution, establishing a journal, January, 1910, to be known as the *Journal of the American Institute of Homeopathy*.

The Trustees' Journal Committee, working in harmony with the Committee on Finance, will issue the best monthly bulletin

within their means. The policy will be of yearly growth, as the finances will permit.

All objectionable features will be removed, to the end that no extra burdens be placed on the other journals of the school and no unwholesome rivalry be created in homeopathic journalism.

The experience of the past will make plain our duty, direction and responsibility.

The will of the Institute is hereby adhered to and the possibility of a unified organization assured.

JAMES W. WARD, M. D., President.

October 15, 1909.

APPEAL TO THE MEDICAL PROFESSION OF THE WEST AND SOUTH.

UP TO THE PRESENT TIME there has not been a concerted effort made to collect and preserve historical data in regard to the origin, evolution and personnel of our profession in this part of our country. The result of this delinquency had been the total loss of much material that should have been preserved, especially pertaining to medical schools and societies, and biographical matter in connection with the practitioners and teachers of medicine of bygone days. A good deal of material of this character is still obtainable if a systematic effort is made to locate and preserve it. It is in the possession of individuals, families and private libraries and will eventually be lost. *The Western Association for the Preservation of Medical Records* was organized in May, 1909, for the purpose of collecting the historical and biographical records of the profession of the West and South. We wish to preserve anything and everything pertaining to Western medicine and medical men and are anxious to enlist the active help and support of every member of the profession who is in sympathy with our aims. We want every one to become associated and identified with the work of our association. We have made arrangements with the Lloyd Library, Cincinnati, Ohio, for the proper housing of the material collect-

ed. The latter will be systematically arranged, catalogued and properly preserved so that it can be made available for research-work. We are particularly anxious to obtain:

1. Medical Journals published in the West and South prior to 1880;
2. Medical books and pamphlets written or published in the West;
3. Manuscript and autographs of early physicians;
4. Old diplomas and other documents of a medical character;
5. Proceedings of medical societies;
6. Reports of hospitals and other medical institutions;
7. Catalogues and announcements of Western and Southern medical colleges of all "schools";
8. Biographies and portraits of Western physicians;
9. Information and material of any kind pertaining to medicine and medical men and affairs in the West and South;
10. Curios of a medico-historical character.

There are no fees or obligations of any kind. All contributions should be sent in care of the Librarian. In view of the fact that we are performing a labor of love and have no funds, our friends will readily understand why all contributions sent by express or freight should be prepaid, so that no expense may accrue to the association. The necessary expenses of the association are at present being met by voluntary contributions of its organizers.

May we not count upon *your* active help and support? We would like to hear from every member of the profession who is interested in the proposed work.

C. A. L. REED, M. D., Chairman.

OTTO JUETTNER, M. D., Secretary.

A. G. DRURY, M. D., Librarian,
710 West Eighth St., Cincinnati, Ohio.



COMMUNICATIONS

CHICAGO LETTER.

DR. J. G. STONE, Hahn. '08, has located in Burlington, Iowa.

Dr. Lloyd, Renssalaer, Ind., brought a patient to the Hahnemann Hospital in September.

Dr. Wilcox, Hahn. '08, has completed his term as interne in Hahnemann Hospital, Chicago.

Dr. A. Almfelt, Hahn. '05, has moved from Somers, Wis., to 719 West Fifty-ninth street, Chicago.

Hering Medical College opened this year with about fifteen new students, and a good year is looked forward to.

Dr. Nettie Campbell, Hering, '05 has become a clinical assistant in Dr. Blackwood's Medical Clinic in Hahnemann College.

Dr. F. H. Lovell, Hahn. '09, has resigned his appointment as interne in Hahnemann Hospital, Chicago, and will locate in the East.

Dr. L. C. Wolcott, Troy, Ohio, and Dr. F. L. Jewett, Lexington, Ky., were recent visitors at Hahnemann College lectures and clinics.

Dr. and Mrs. G. P. Waring, 618 Church street, will leave next Wednesday to spend a year or more in California.—*Evanston (Ill.) Index*.

Dr. E. D. McClean, Hahn. '08, has changed his location from Everest, Iowa, to Oskaloosa, Iowa, where he succeeds Dr. Graland, who died recently.

Dr. G. P. Waring, ex-secretary of the Regular Chicago Homeopathic Medical Society, has left Chicago to take up his residence and practice in California.

Dr. C. C. Burlingame, Hahn. '08, of the Massachusetts Insane Hospital, Westboro, Mass., was a recent Chicago visitor on his vacation. The doctor is well pleased with the East.

Hahnemann College this year has thirty-five new freshmen, three sophomores, two juniors and eight seniors, some coming in from the old-school and some from other homeopathic colleges.

Four students from England one from Calcutta, India, are at Hahnemann College this year, in the senior class.

On Sunday, October 17th, memorial services were held for the late Dr. G. F. Shears at All Souls' Church. The address was made by Rev. Jenkin Lloyd Jones. The faculty and student body of Hahnemann College attended.

Dr. H. R. Chislett has been chosen president of Hahnemann Medical College and Hospital to take the place made vacant by the death of Dr. G. F. Shears. Dr. C. E. Kalke becomes the new dean of the faculty and Dr. A. R. McDonald dean of the students.

On Tuesday evening, October 5th, occurred the meeting of the Regular Chicago Homeopathic Medical Society with the Chicago Homeopathic Medical Society as guest. Dr. J. W. Hingston's paper on "Homeopathy vs. Psychotherapy" was discussed by Drs. Hanks, Aurand and Ingersoll; and Dr. Weirick's paper on Practical Dietetics was discussed by Drs. Bruce, Hingston and Ellis.

The opening exercises for the year and the welcome to new students of Hahnemann Medical College and Hospital was held on Tuesday evening, September 29th. Dr. E. S. Bailey made the address on behalf of the board of trustees and Dr. H. S. Aurand on behalf of the faculty. Dancing and refreshments followed the programme and a very pleasant evening was enjoyed.

A new feature in Chicago this year is the getting together of the two Homeopathic Medical societies. The Regular Chicago Homeopathic Medical Society meets the first Tuesday of each month and the Chicago Homeopathic Medical Society meets the third Thursday in each month. Each society is entertained by the other at its regular meeting and a good programme has been arranged for the coming winter. The two meetings that have been held under the new system were well attended and enjoyed.

The Evanston W. C. T. U. gave a reception Tuesday afternoon at the home of its president, Mrs. Bentley Masslich, 1732 Sherman avenue, for Mrs. G. P. Waring, who has been treasurer of the society for some time and is leaving Evanston for California. The guest of honor was presented with a souvenir spoon and pin, the presentation speeches being made by Mrs. S. M. D. Fry and Mrs. Masslich. An original poem was read by Mrs. A. O. Auten. Music and refreshments were the other features.
—*Evanston (Ill.) Press.*

Chicago, Ill., October 18, 1909.



EDITORIAL SECTION



JAMES WILLIAM MASTIN, M. D., Managing Editor, Majestic Building
J. WYLIE ANDERSON, M. D., Business Manager, Steel Block

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V. A. Hutton, M. D., Meeker, Colorado

J. E. Huffman, M. D., Healdsburg, Cal.

James Tyler Kent, A. M., M. D., Chicago, Ill.

Julia C. Loos, M. D., Harrisburg, Pa.

Carrie V. Newton, M. D., Brewer, Me.

Samuel S. Smythe, M. D., Denver, Colo.

Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

DR. JULIA C. LOOS. This most excellent writer and still better homeopath, has prepared three excellent articles for THE CRITIQUE, which will begin in the December issue. The subjects are:

Diagnosis: What is Curable in Disease.

Materia Medica: What is Curative in Medicines.

Therapeutics: The Application of Remedies to Disordered Individuals.

The purpose of the author will be to incorporate the fundamental principles which form the basis of Homeopathic prescribing; this will be accompanied by illustrations from clinical experience.

THE CRITIQUE contemplates much pleasure and no little profit to its readers from this series by Doctor Loos and, besides, has in mind much more matter of a similar sort to serve its patrons during the forthcoming year. This is a particularly propitious time to become a patron of this publication. M.

HOMEOPATHICS.—The foreword of this article was the subject of a paper read by Dr. G. A. Huntoon before the Hahnemann Association of Iowa, in which he deplored the decree of custom that cut off this topic from State Society programs.

The paper in question was a thoroughly Huntoon product and bristled with good things galore. He paid his respects to our *Materia Medica* in the following concise and convincing manner:

"If our *Materia Medica* were divided into two parts and only those thirty or forty remedies included in the first part, that are the most frequently used in everyday practice, and only those remedies taught in our schools, it would make men very proficient in the use of those remedies, and would give them a foundation in *Materia Medica* that would enable them to do efficient work, and would be an incentive to continue the study and gradually absorb the less frequently used remedies.

"The rest of the *materia medica* could be put in a part by itself for the study of the specialist, or the use of the general practitioner with the help of his repertory."

THE SETTLED QUESTION.—Elsewhere I am printing a communication from President Ward of the A. I. H., whereby it will be seen the journal question has been satisfactorily concluded; in other words, on the first of the coming year, it was so

resolved by the Trustees, the Institute will establish and hereafter issue an official organ which will bear the same title as its immediate predecessor, the *Journal of the American Institute of Homeopathy*.

THE CRITIQUE is pleased to say the abrogation of the contract as well as the proposed arrangement as to future publication, is fully concurred in by Dr. W. A. Dewey, who has shown a somewhat tardy but none the less tactful willingness to work for the best interests of the Institute.

The Trustees are deserving a general vote of commendation for their conductment of this particularly delicate bit of business, but I do not propose, as suggested by one of my eastern advisers in a personal letter, to slop over and throw bouquets at the editor of what has been looked upon as a journalistic joke from its very inception.

No doubt the retiring editor in question will have ample opportunity to exhibit his ability and energy as a medical magazine manager when he revives *Medical Century*, as that labor of love will be in his own behalf. Certain it is nothing resembling resourcefulness or ability to do along such lines were in evidence during the brief period afforded him to serve Homeopathy by the Journal Committee of the American Institute.

I am inclined to resent the personal letter of advice sent me by a certain eastern contemporary, inasmuch as most of our journals failed to see where they were "at" until touched by the possibility of disaster to themselves in case the *ex-Journal* made a go of it.

Had it not been for the sudden and unexpected pause put upon its somewhat spectacular progress by THE CRITIQUE, it would have not only made a "go" of it, but many of our journals would have done likewise, with the slight difference that in the case of the former its "go" would have meant its perma-

nency while the "going" of the latter would have been for good and all, so the rather tardy awakening of the journals along with the advice given the editor of this publication, to which I refered previously, is somewhat on a scale with the boast of the Kentuckian.

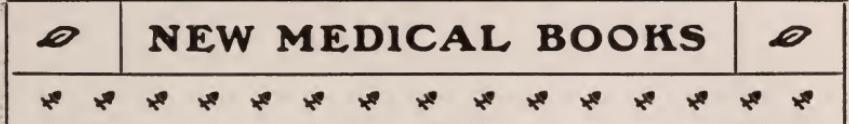
Mr. Kentuckian was indiscreet enough to become involved in an altercation with a bear. Just at a point in the mixup where Mr. Man was about to say his little "Now I lay me," his wife, with accurate aim and a bullet, killed his adversary in battle.

He afterwards braggingly remarked that "Betsey and I killed the b'ar!"

If those who have shown so much warpaint recently had exhibited one-half the belligerency at the beginning of the game, along about the time THE CRITIQUE was looked upon as a "knocker," there would have been no reason why the matter should not have been settled by the members themselves at the Detroit meeting.

As Prsident Ward says: "It is now a settled question," and THE CRITIQUE presents its very best respects to the Trustees and hopes the proposed publication will prove a prosperous venture; a prolific source of revenue to the Institute. Greetings! M.

HE WANTS TO KNOW.—A gentleman of Newburg, N. Y., writes to the paper and wants to know "why the doctors there, who act in behalf of the board of education in vaccinating children free, think it necessary or advisable to require the parents to sign a paper, relieving them from all responsibility, if vaccination can do no harm." We did not know that such a paper was required, but it is a wise thing for a financially responsible doctor to demand in these days when damage suits are brought on the least possible grounds, for every doctor knows that any case of vaccination may easily furnish grounds for a damage suit.—*Envoy.*



NEW MEDICAL BOOKS

DISEASES OF THE PERSONALITY.—By Professor Th. Ribot, Paris. Translated, (with homeopathic annotations), by P. W. Shedd, M. D., New York. 142 pages. Cloth, \$1.00. Postage, 7 cents. Philadelphia. Boericke & Tafel. 1909.

* * *

RADEMACHER'S UNIVERSAL AND ORGAN REMEDIES.—(Erfahrungsheillehre). Abridged and translated by A. A. Ramseyer, "Prove all things; hold fast that which is good." 104 pages. Cloth, \$1.00, net. Postage, 5 cents. Philadelphia. Boericke & Tafel 1909.

* * *

LEADERS IN RESPIRATORY ORGANS.—By E. B. Nash, M. D. Author of "Leaders in Homeopathic Therapeutics," "Leaders in Typhoid," "Leaders in Sulphur" and "How to Take the Case." 188 pages. Cloth, \$1.50. Postage, 8 cents. Philadelphia. Boericke & Tafel. 1909.

* * *

A NURSERY MANUAL.—The Care and Feeding of Children in Health and Disease. By Reuel A. Benson, M. D. Lecturer on Diseases of Children, New York Homeopathic Medical College, etc. 184 pages. Cloth, \$1.00. Postage, 5 cents. Philadelphia, Boericke & Tafel. 1908.

* * *

COSMETIC SURGERY; THE CORRECTION OF FEATURAL IMPERFECTIONS.—By Charles C. Miller, M. D. Including the description of a variety of operations for improving the appearance of the face. 136 pages. 73 illustrations. Prepaid \$1.50. Published by the Author, 70 State St., Chicago, Ill.

* * *

ESSENTIALS OF HOMEOPATHIC MATERIA MEDICA AND HOMEOPATHIC PHARMACY being a Quiz Compend upon the Principles of Homeopathy, Homeopathic Pharmacy and Homeopathic Materia Medica arranged and compiled for the use of students of medicine by W. A. Dewey, M. D. Fourth Revised Edition. 372 pages Cloth, \$1.75, net. Flexible Leather, \$2.00, net. Postage, 11 cents. Philadelphia. Boericke & Tafel. 1908.

* * *

THE FOOD TRACT.—Its Ailments Disease of the Peritoneum. By A. L. Blackwood, B. S., M. D., Professor of Clinical Medicine and Materia Medica in the Hahnemann Medical College, Chicago. Author of "A Manual of Materia Medica, Therapeutics and Pharmacology," "Diseases of the Heart," "Diseases of the Lungs" and "Diseases of the Liver, Pancreas and Ductless Glands." 359 pages. Cloth, \$1.75. Postage, 9 cents. Philadelphia. Boericke & Tafel. 1909.

A TEXT BOOK OF MATERIA MEDICA AND THERAPEUTICS.—

Characteristic, Analytical and Comparative. By A. C. Cowperthwaite, M. D., Ph. D., L. L. D. Tenth Edition with an Appendix, enlarged including new remedies. 864 pages. Canvas, \$5.00, net. Half-morocco, \$6.00, net. Postage, 28 cents. Philadelphia. Boericke & Tafel. 1909.

The foregoing statement by the publishers regarding this old stand-by, is about all that is necessary inasmuch as a majority of the homeopathic profession are sufficiently familiar with its many favorable features, as to almost guarantee a general coincidence with any favorable mention which may be made regarding it. This last edition is a much better gotten up product of the printer's art, if such a thing is possible, than any of its predecessors; that of itself is saying a good deal. Many new provings are found in this work, some of which have never before appeared in print, and they are all handled in the clear, concise and convincing manner characteristic of Cowperthwaite. It is a work which should be in the hands of every homeopathic physician and student in the land.

* * *

THE RENEWAL OF LIFE.—By Thomas Bassett Keyes, M. D., of Chicago Chairman of the first organization committee of the American Congress of Tuberculosis, and one of the vice presidents of the International Congress of Tuberculosis, St. Louis Exposition, 1904; first vice president of International Congress of Tuberculosis, New York, 1906, and chairman of the section on the Relation of Insanity to Tuberculosis; member of the National Association for the Study and Prevention of Tuberculosis. Formerly editor of the "Tubercle," a journal on Tuberculosis, etc. The Tubercle Press Bureau, Chicago, Ill. 1909-10.

This work consists principally of arguments sustaining the subcutaneous injection of oil in the cure and prevention of senility and disease; for the making of the acme of abundant health, stamina, vigor, vitality and constitution; for the cure of consumption and other diseases, particularly those of a chronic nature. While one cannot agree with all the author advances the work is well worth reading and will no doubt become a valuable addition to the library as the theory becomes better known. It is interesting in all of its seventeen chapters and over two hundred pages. The section devoted to the method of "making the subcutaneous injection of oil" as well as the one following, which is devoted to "dieting and cooking for the cure and prevention of consumption" are particularly pleasing bits of literature. This is a work which should be in the hands of every advanced thinker; the theories seem rational and will, no doubt, be universally adopted later.

M.



Miscellaneous Matter



Send Us a Personal Item Occasionally

On and after January 1st, the American Institute of Homeopathy will issue its own publication.

* * *

Dr. J. Wesley Harris and bride, after a sojourn of several weeks across the pond, returned to Denver the latter part of September.

* * *

Dr. W. A. Burr, after a short visit with friends in Denver the latter part of September, returned to his home in Pasadena, Cal. The doctor is highly elated with his new place of residence—but Oh, you Denver!

* * *

If you are in the market for reading matter for the forthcoming year, let **The Critique** figure with you for your supply at greatly reduced rates. Read our advertisement on another page—giving prices and publications.

* * *

Dr. Le Roy C. Hedges, the "copper king" of Grand Junction, was a welcome caller at **The Critique** office the latter part of September. It always makes a fellow feel good to talk with Hedges awhile, so we hope he will drop in again soon.

* * *

The many friends of Dr. Charles Nelson Hart will regret to learn of the serious accident which befell him the forepart of last month. In alighting from a moving street car he lost his balance, was thrown violently to the pavement and broke one of his legs.

* * *

The Critique is constantly receiving communications from foreign countries requesting "sample copies." While we are willing to do our share towards this sort of service we must insist upon stamps to cover cost of postage. This applies to the United States as well.

* * *

We have just issued No. 10 of our Dislocation chart series. We will send all back numbers, free of charge to physicians, on request. Please mention this in the next issue of your journal, and oblige.
Yours truly,

BATTLE & CO.

THE CRITIQUE.

Mrs. Dr. George William Compton, accompanied by Master Compton, visited friends and relatives in Denver the latter part of September and the first of last month. Dr. Compton is now located in San Diego, Cal., and **The Critique** is glad to record the fact that he is prospering.

* * *

Boston, Oct. 4.—“Operations for appendicitis should be classed ‘criminal,’ and should be prohibited by law,” declares Dr. Charles Page, a prominent physician of this city. He declares that the death record from operations is appalling. He ascribes the deaths of Clyde Fitch and Governor Johnson to operations, and not disease.—**Express**.

* * *

Mr. Richard H. Hart, son of Dr. Charles Nelson Hart of this city, has been selected successor of Judge D. C. Beaman as secretary of the C. F. & I. Co., as well as of several coal and railroad corporations in this state. Mr. Hart is a young man of excellent qualities, a successful lawyer and **The Critique**, along with many friends and admirers, is pleased to mention his advancement.

* * *

“The president of the American Gynecological Society has appointed a committee to report at the next annual meeting in Washington, on the present status of Obstetrical Teaching in Europe and America, and to recommend improvements in the scope and character of the teaching of Obstetrics in America. The committee consists of the professors of Obstetrics in Columbia University, University of Pennsylvania, Harvard, Jefferson Medical College, John Hopkins University, Cornell University and the University of Chicago.

Communications from anyone interested in the subject will be gladly received by the chairman of the committee,

Dr. B. C. Hirst, 1821 Spruce St., Philadelphia, Pa.”

* * *

The Ohio Sanitarium, of which Dr. C. E. Sawyer is president, has gone into the hands of a receiver. Dr. C. E. Sawyer was appointed by the court as receiver with power to continue the business. This is not a financial failure, but was deemed best by Dr. Sawyer to get rid of the Park Sanitarium, of Columbus, Ohio, which was jointly owned by the same company, and has not proven a financial success. Dr. Sawyer has worked hard and faithfully for many years building up his sanitarium, and we trust the matter will be settled satisfactorily to him very soon
—**The Clinique**.

READING NOTICES

Of Interest to Everybody

HAGEE'S.—There exist a number of cutaneous disorders which, in the main, are due to a general bad state of the tissues. It is in these that a general up-building process must be inaugurated in order to heal and improve the local cutaneous disturbance. It was formerly the custom to order cod liver oil, with good results. Today it is equally advantageous to give the cord. ext. ol. morrhuae comp. (Hagee), which acts not only as well but better, and is devoid of grease.—Am. Jour. Dermatology.

TWO INTERESTING CASES.—Dr. Geo. Selkirk Jones, Ph. D., L. S. A., in an original article, first printed in *Medical Reprints*, London, says: "I am desirous of placing upon record the two following clinical cases, which have come within the sphere of my professional occupation. The first was that of a lady, the subject of a periodically recurring hemicrania of a decidedly neurotic type, upon whom the usual remedies had (ad nauseam) been tried, with occasional benefit alternated with disappointment. This led me to persevere with Anti-kamnia tablets, one every two hours for eight doses. This case having secured for me a meed of confidence, I have labelled it, mentally, as my first success with this preparation.

The second one is that of a man aged forty-five, the subject of asthma of a pulmonary type and associated with gastric troubles, for whom I was in the habit of prescribing alkalies. In this case I am now observing the gradually increasing evidences of the benefit of Anti-kamnia & Codeine tablets, which, up to the time of writing, have not failed or fluctuated in their analgesic and stimulating action upon my patient's asthmatic condition.

THE CHILD THAT FAILS TO THRIVE is one of the many troublesome and vexatious clinical puzzles that the family practitioner is called upon to solve.

Malnutrition, slow growth and development, sluggish metabolism, unusual susceptibility to digestive and respiratory disorders, mental dulness, physical lassitude and lack of snap and ambition, constitute a clinical picture that every physician of experience will readily recognize.

To arrive at any definite determination in regard to the treatment of such a patient, a careful and thorough physical examination is essential, in order that any of the causes which act reflexly through the nervous system may be discovered and properly dealt with—Post-nasal adenoids, a redundant prepuce, ascarides, eye strain, as-

well as other local irritations, may be more or less responsible for the child's backwardness, both mental and physical; constitutional diatheses, such as syphilis, tuberculosis and lithemic states, should also be looked for and intelligently treated. After the discovery and removal of the cause, tonic and reconstituent treatment is almost invariably indicated and among the reconstructives especially adapted to the delicate digestive organs of the under-nurtured child, Pepto-Magan (Gude) is easily first. Its iron and manganese content exists in organo-plastic combination with peptones, and the preparation, as a whole, is so pleasant and readily tolerable as well as immediately and wholly assimilable, that children of all ages take it readily and benefit materially from its corpuscle-building and hemoglobin-contributing power. Unlike most iron-containing remedies, it does not injure the teeth nor cause constipation.

AN IMPORTANT LITTLE WORK ON BIOLOGICAL THERAPEUTICS.—In view of the near approach of the season when biological therapeutics will claim a considerable share of the attention of practitioners, reference may pertinently be made at this time to a unique and valuable contribution to the subject which has recently issued from the press of Messrs. Parke, Davis & Co. The publication consists of fifty-two pages, exclusive of the cover, and appears in brochure form. It is handsomely printed on white enamel paper of first quality and bears in colors a profusion of halftone illustrations. The title is "Serums and Vaccines." A brief chapter on the origin and development of biological therapeutics, with an interjected hint as to what the opsonins may have in store for us, constitutes the introduction. Then follow chapters on serums—anti-diphtheric, anti-tetanic, antistreptococcic, antigenococcic, antitubercle and antivenomous; on tuberculins; on vaccines, including the new bacterial vaccines which are exacting so much attention from the medical world; on organo-therapy, its development, and some of the important products that are associated with it—"a tabulation," in the language of the brochure itself, "of such creations of biologic pharmacy as are really utilizable in medicine." There are striking pictures of the company's home laboratories at Detroit, with numerous interior views; the research laboratory; the operating house and biological stables at Parkdale Farm (where the animals are cared for), with accompanying landscapes in nature's colors.

This little book, "Serums and Vaccines," is distinctly "worth while." If you haven't seen a copy, drop Parke, Davis & Co. a postal card at their home offices in Detroit, mentioning this journal, and get one. It is a safe guess that any physician who receives the brochure will read it admiringly and with interest, filing it away thereafter for future reference.

This is a picture of Dr. J. Wyile Anderson and his 1,325-pound grizzly bear, taken in Alaska just after a shot from the hunter's Winchester had shattered brain's spinal column and tumbled the monster over dead.



30-1

Denver, Colorado, December 1st, 1909

Entered at Denver Postoffice as Second-Class Matter.

THE KEY TO SUCCESSFUL PRESCRIBING.

Letters to a Young Homeopath—Letter No. 2.
THE FOUR ESSENTIALS.

MY DEAR DOCTOR: Complying with my promise of a week ago, I now write you upon the following topic: *How to Cure Judiciously and Rationally, as a Practitioner of the True Healing Art.* I suggested that Hahnemann, the greatest human physician the world has ever known, lays down four essentials, namely: (1) You must clearly perceive what is to be cured in diseases. (2) You must clearly perceive what is curative in medicines. (3) You must know how to adopt, according to clearly defined principles, what is curative in medicines to what you have discovered to be undoubtedly morbid in the patient. (4) You must know the obstacles to recovery in each case and how to remove them. (See Organon, Paragraph 3.)

How grateful we ought to be that the founder of Homeopathy has left us such an accurate, concise and comprehensive synopsis—the essential prerequisites which a physician *must* possess if he would be a successful Homeopathist. And, my dear doctor, if I can succeed in impressing your mind with these absolute essentials, one by one, drive them into your brain and heart and life, you will not only develop into a true Hahnemanian Homeopath, but you will face each malady you have to meet with a confidence, a self-assurance and a *conviction*, which only a true Homeopath can experience.

Nor will specific chancre, gonorrhoea, old-fashion malarial chills, skin eruptions, diphtheria—even when the membrane fills the nasal passages, or uncomplicated haemorrhoids prove to be exceptions. You can master all such with a few doses of the right medicine in the right potency on the tongue. The writer has done this over and over; and there never was a greener, more unskilled medical blunderer than he before he got an insight into the meritorious features, the underlying principles of the Homeopathic philosophy and acquired an accurate, definite knowledge of the *science* of Homeopathy, and thereby secured the key to successful prescribing. The task is not an easy one by any means. While Homeopathy is an exact science, it is difficult to practice; but more difficult to *learn*.

This is why we find so many pretenders and so few of the

Hahnemannian type. Let us then, with the greatest patience, diligence and earnestness, examine in detail the four essentials mentioned above. 1. "*If the physician clearly perceives what is to be cured in diseases, that is to say, in every individual case of disease (knowledge of disease, indication).*." It is one thing to recognize disease in contradistinction to health, but quite another to perceive "what is to be cured in diseases." That is the business of the true physician.

Disease, and that which is to be cured in disease, are *immaterial* and must be "perceived." What we see are the *results* of disease. Some of these results, such as crooked fingers and ankylosed joints, as remnants of rheumatism, never will be removed. Other results which we see, or feel, or hear, such as red eyes, enlarged liver, inflamed lungs or bronchial tubes, oedema, cutaneous eruptions, the chancre, haemorrhoids, and many other results which we recognize by the senses, will pass away when what is to be cured is perceived, and the medicinal power which is to accomplish the cure is perceived, and the proper application of the one to the other is made. Really what is to be cured in all cases is *a deranged vital force*; but the evidences of such derangement not always being the same, such derangement must be perceived in each individual case of disease. The unseen things are the real things. The disease *within*, the *inner nature* of drugs, and the *inner man* are the real things. We can only recognize the disease within by the patient's symptoms reflected outwardly.

No man can know disease except as he recognizes symptoms which indicate a morbid state; and when these symptoms are removed, the cure is accomplished. Not that we shall recognize certain symptoms by which we are to give the disease a fixed and definite name wherever found, but we must learn to recognize the totality of symptoms, the image of sickness "*in every individual case of disease.*" That is what the great teacher said. This means *individualization*. Here, say, are a dozen patients. Let us assume that they all have the same disease so far as the diagnostic name is concerned. Still, in each one there is *something* to be cured which the other eleven do not have. I was recently called into a home where four children were suffering from whooping-cough. The mother told me that George's urine turned milky-white soon after being voided. Now *that* did not have to be cured in the other three, for they did not have that symptom. And, by the way, guided by that one signal to Cina, I found on further inquiry an image of that remedy and Cina 1-M. not only cured that morbid condition, but relieved the whoop-

ing-cough like magic. "What," you ask, "Cina for whooping-cough?" No, Cina for the *patient*; and Cina for any patient who has the image of Cina proving. The symptoms which one patient has in any given disease, which another patient has *not* in the same disease, are due, not to the disease, but to the *individuality of the patients*. And this is what we mean when we say treat the *patient*, and not the disease. And this is what Hahnemann meant when he said the physician must clearly perceive what is to be cured "*in every individual case of disease*." Our knowledge of disease, "*indication*," as Hahnemann calls it, is wholly dependent upon the *individualizing symptoms* in each case of sickness. If Jones is sick, what you need, and what you *must have* in order to cure, are *Jones' symptoms*. Not the name of his sickness and the medicine which you prescribed for that name when Smith was sick, but all the odd, peculiar individualizing symptoms now to be ascertained in *Jones*; for it is *Jones* who is sick this time, and it is *Jones* who must be cured.

2d. "*If he clearly perceives what is curative in medicines, that is to say, in each individual medicine (knowledge of medicinal powers).*"

Just as it is necessary to clearly perceive what is to be cured in each individual case of disease, so it is equally incumbent upon the physician to clearly perceive what is curative in "*each individual medicine*." He must know the "*medicinal powers*" of each individual drug. This he learns in a reliable *materia medica*. Not a modernized one, but in those provings which he has made upon himself, and those which Hahnemann made upon himself and others. You can no more modernize the action of any drug upon the healthy human body, than you can modernize the science of philosophy and Homeopathy; and you can no more modernize Homeopathy than you can the law of gravitation.

A rabbit can eat some things with impunity that would kill a horse; and a sick man taking a given drug, does not know whether to attribute new symptoms to the drug or to his disease. Nor does his doctor know. But when each medicinal substance, singly and alone, is tested in healthy human subjects, the artificial sickness produced marks the medicinal powers of each drug. That artificial sickness is the *proving* of the drug; and that proving or pathogenesis emphasizes by each symptom produced the *curative power* of that drug. What is curative in each individual medicine is, in such a proving, made to stand out in *living capitals*; and the apparently trivial symptoms, the modalities, the symptoms which only a trained Homeopath knows how to utilize, are the identical symptoms which he who would modernize Home-

opathy is bent on discarding as worthless. If the morbid state shows a swollen ankle and a swollen tonsil, it is not enough to know in what drug proving we get these, but we must state specifically the *right* tonsil and the *left* ankle. Then we must enquire further what is morbid in the case. If we find bloating, the question arises, When? Suppose the answer is, "After eating." This calls for another question: Do you mean the morning, noon, or evening meal? If she tells you it begins some hours after the noon meal and that it is aggravated from four to eight, you have another land-mark. Now if you can so question her that she will tell you *of her own free will* that she has copious discharges of pale urine; or frequent micturition at night; or red, sandy sediment in the urine, or all these, then you are learning what is to be cured in that individual sickness, pretty fast. To learn that she can not eat is not definite enough; but if she says she cannot eat *because she feels so full*, then we have a landmark; but still a stronger one if eating a small quantity causes this *feeling of fullness*. Now if with the foregoing you observe that she is mentally keen, but of a feeble muscular development, you then have an image upon which you can rely; and if you choose Lycopodium you will also have a remedy upon which you can rely with the most implicit confidence, if used high enough. To know and to fully realize that we must individualize in each individual case of disease as to what is to be cured, and individualize in each medicine as to what is curative, is to know *two of the vital truths of Homeopathy*. Every medicine is distinguished from another by definite traits. Hence, that of which non-Homeopaths have accused us as triviality, becomes the key to successful prescribing, namely, *individualizing* in practice. The discovery of modalities, of conditions under which a medicine discloses its specific powers, is exclusively the merit of Homeopathy. By this means we find the specific for the patient, and not the diagnostic name. To acquaint the general public with these great truths and thus make known, for the public good, the possibilities of cures of which other systems are incapable, is both the duty and pleasure of every Homeopath worthy of the name. Physicians who have hitherto been strangers to pure Homeopathy may convince themselves, without further exertion, of Nature's truth in regard to cure by skillfully applying the four essentials which we are now examining.

These four points are elaborated and elucidated in different parts of the Organon and Chronic Diseases. These understood and you have the solid foundation, the rock, the *truth*.

Before proceeding to our third item, I wish to comment

somewhat upon the first two. *Perceiving what is to be cured.* That which is to be cured in a case of individual sickness must be "perceived" as you perceive truth or falsehood. You may see an eruption on the skin, a swelling of the feet, an inflamed throat, a tumor, etc., and still not perceive what is to be cured. All those things which you have seen are not disease, but the results of disease. The disease itself cannot be seen, not even by the aid of the strongest microscope. Disease, apart from the domain of surgery, whatever the outward manifestation, is a *deranged vital force*. Such derangement is never produced in any other way than by a spirit-like or dynamic attack upon the vital force. The vital force itself is a spirit-like dynamis. And the derangement can never be removed in any other way than by dynamic powers.

So you will here catch the idea that disease, disease cause and the power necessary to cure, are spirit-like or dynamic. All are entirely outside of the realm of materiality. Hence, what is to be "perceived" in any individual case of sickness is the *affection of the vital force*. This is the *internal essence of the disease*; and such perception is only possible because of the outwardly reflected picture, the totality of the symptoms—Nature's only language. When the derangement is removed by the dynamic power of the indicated remedy, the whole of the disease and the cause of the disease are, at the same time, also removed. As a result no symptoms remain.

Perceiving what is curative in each individual medicine. Corresponding to the vital force of the human body, is the *dynamis* of the drug. This is its *internal essence*; its internal nature. Just as we perceive the derangement of the vital force in any given case by the outwardly reflected image, so we perceive the curative powers of any given drug-dynamis by its outwardly reflected picture when tested in healthy human bodies. Hence, you will note the fact that we can not see what is to be cured in disease, nor can we see what is curative in medicines. Each is reflected from within out. And in each case this reflected image, the external picture, constitutes the medium by which we perceive. The first image may be in any one individual sickness; but the second, the artificial image, is found in the aggregate of *all the provers*; for any given symptom, if unquestionably produced by a given drug, even if only observed once and upon one person, becomes a constituent part of that drug image, and will infallibly apply to any patient whose natural sickness is most similar to that image. The first image, that of natural sickness, shows the possibilities of one organism

at a given time; but the second image, that of artificial sickness as the result of one individual medicine, shows the possibilities of *many* organisms. In each instance, in the portrayal of the internal essence of the disease and the internal essence of the drug, it is the *image* that makes perception possible. There is no other medium; and the physician who *sees* an ulcerated os, or *feels* an enlarged liver, or *hears* the mitral sound by which he decides there is an impairment of the function of the mitral valve, and he exhausts his medical skill and energies *in an effort to cure these*, does not "perceive" what is to be cured or have the slightest conception of Homeopathic philosophy. In each case, therefore, as the master says, that which is to be cured and the individual character of the drug-power which is to accomplish the cure, must be *perceived*. It is a *mental* process and one which cannot be successfully performed by the eyes, the fingers and the inventions of men. If you understand this, my dear doctor, you can put another feather in your cap as an indication of your progress toward pure Homeopathy. No old-school physician, no mongrel, no eclectic and no physician in the world, save the true Homeopath, knows the drug-images of the medicines he prescribes when dealing with life and death.

Such knowledge is impossible except when acquired by testing these medicines in healthy human bodies. No other system of medicine does this but the Homeopathic; and the mongrel, the doctor who is part old-school and part Homeopath, though he boasts of the advantage such testing of drugs affords, utterly rejects the finer shades of the drug-image brought out by the higher potencies and also spurns the individualizing subjective symptoms so indispensable to the successful Homeopathic prescriber.

He vainly enquires *what tissues* each drug affects and with an assumed air of professional wisdom talks about drug-pathology! It is from his type of physicians the questions come, "What is the best medicine for whooping cough? What remedy do you rely upon for the first stage of typhoid fever?" And then they will inform us that the best medicine they ever "tried" is so-and-so. At the same time said medicine never was "tried" on healthy subjects and hence no living man could tell what its drug-image is, nor what it is capable of curing! The curative principle of a drug is not perceptible by any quality related to its material matter, but is hidden in its dynamis, and this being spirit-like both in substance and action, there is but one method known to man by which its curative nature can be revealed, namely, *a systematic proving on many healthy men and women.*

Then we shall know its curative principle, know how to scientifically prescribe it for the extinguishing of disease, and also know when it could not possibly be of any benefit whatsoever.

In clearly perceiving what is to be cured in every individual case of disease, you will find it necessary to exercise some cunning as well as your utmost powers of observation. Following Hahnemann's instructions, let the patient tell his story in his own way. Then, having noted the gist of it and especially marked those items which are likely to prove *individualizing*, review it all and call out those things which portray the patient's *individual image of disease*. In doing so, *do not lead the witness*. Ask your questions in such form that he can not answer "yes" or "no." Force him to say, not what you want him to say because of a preconceived medicine you may have in mind, but what he ought to say to express the truth concerning his case. Keep your mind free from this, that and the other medicine which you think *ought* to be indicated; for no man can tell beforehand what the indicated medicine is to be. That is to be decided by his individual symptoms, and these you are endeavoring to get and commit to record. To try to decide *a priori*, what the curative agent is, is to blunder in the very beginning. And, I will admit that this is one of the hard things to overcome. But it *must* be overcome in order to prescribe successfully. Let your determination be to secure *a faithful record of his individual image of sickness*. This done and the battle is two-thirds over—victory is in sight. But such an image can only be secured by the closest observation of the objective symptoms and skillfully drawing out the subjective symptoms—particularly those which are odd, unusual and peculiar, together with their modalities. Now I am aware that as an old school physician or as a mongrel you have been taught to rely upon the *objective* symptoms which present themselves in a case of natural sickness: to ignore wholly or in a large degree what the patient tells you and to spend your chief energy upon a correct diagnosis. But I tell you that this is not the *doctrine of Hahnemann*. He says: "We should listen particularly to the patient's description of his sufferings and sensations, and attach credence especially to *his own expressions* wherewith he endeavors to make us understand his ailments." (¶ 98.)

When we listen to the patient's description of his sufferings and sensations, we are securing *subjective* symptoms and the founder says "we should listen *particularly*" to these. Again he says, speaking of the physician: "He notices only the deviations from the former healthy state of the now diseased indi-

vidual, which are *felt by the patient himself*, remarked by those around him and observed by the physician." Those deviations from health which are "*felt by the patient himself*" constitute *subjective symptoms*; and Hahnemann says the physician is to "take note" of these. Then he continues: "All these perceptible signs represent the disease in its whole extent, that is, together they form the true and only conceivable portrait of the disease." (¶ 6.) Hence, to ignore *what the patient tells you*, is to blot out a part of the portrait and the *best* part at that.

Now in contrast to this, listen to the arbitrary words of a prominent so-called Homeopath in the Journal of the American Institute of Homeopathy, March, 1909: "Subjective symptoms are not to be relied upon only to a very small extent, because they vary greatly in different individuals and oftentimes in the same individuals, at different times. So I would emphasize the importance in every case of a careful weighing and formulating of the objective symptoms." That sounds very much like a "regular"; but it is from the pen of a very nice man—a splendid fellow, who conducts a sanitarium and has more "helps" for each medicine than Nature ever demanded, and more than Homeopathy ever needed or provided.. Such verbiage as the foregoing is very misleading for the young Homeopath. Not having had a true Homeopath for a preceptor, and not having attended a true Homeopathic College, he does not know. He naturally looks to his seniors and supposed superiors in the profession, and when statements like the foregoing appear in the organ of a National Institute without one word of comment or correction editorially; and when such papers are read before the American Institute in convention assembled and influential members stand up and thank the authors for such productions, the young Homeopath would naturally think they are all right. Think of it! "Subjective symptoms are not to be relied upon *only to a very small extent*." And observe the reason assigned: "Because they vary greatly in different individuals and oftentimes in the same individuals, at different times." Certainly; and *this is the very reason why no man can make a true Homeopathic prescription without them*. They enable us to individualize; and individualization is the very heart and life and soul of Homeopathy. Again the same paper says: "We do know also that careful diagnosis always aids in making the most scientific Homeopathic prescription." If he had said *sometimes* aids, it would have been bad enough; but when he affirms that diagnosis "always aids in making the most scientific Homeopathic prescription," every true Homeopath from Hahnemann to Dunham will

rise up in their graves to protest against such a sentiment. The symptoms by which we diagnose the disease are *not* the symptoms by which we diagnose the remedy. I will tell you, my young doctor, that you do not have to have the slightest idea as to what to call the malady, in order to make a scientific Homeopathic prescription. Listen to Hahnemann: "In investigating the totality of the symptoms of epidemic and sporadic diseases it is quite immaterial whether or no something similar has ever appeared in the world before under the same or any other name. The novelty or peculiarity of a disease of that kind makes no difference either in the mode of examining or treating it, as the physician must any way regard the pure picture of every prevailing disease as if it were something new and unknown." So whether the sickness is epidemic or not epidemic "the totality of the symptoms," "the pure picture," is all that is needed in order to a scientific Homeopathic prescription. If there is any one thing which Hahnemann insists upon more than another, it is that we shall base the prescription on the totality of the symptoms, the image of individual sickness; and if we are to ignore the subjective symptoms, what becomes of the totality? Again I quote from the same paper: "There was a time when it seemed all sufficient in the making of a Homeopathic prescription to rely entirely upon symptoms alone. This policy answered so long as there were so many elements of doubt connected with the discovery of causes and effect and the making of a diagnosis, but since much of what was heretofore guess-work has been overcome by scientific research, it is no longer consistent or advisable to continue such policies." Now you have it! Not only subjective symptoms are to be rejected, but all symptoms, except such as are necessary for "the making of a diagnosis": and the prescriber is to rely upon "the making of a diagnosis" and upon "scientific research" (old-school research!) I challenge the world to produce the record in which any physician whose Homeopathic tendencies were unquestioned, wrote in this strain; or who ever hinted that "subjective symptoms are not to be relied upon only to a very small extent." You can afford to ignore gibes, but you can never afford to drink in such "Homeopathic" literature as the foregoing.

Now, my dear young doctor, that you may not be deceived by such mongrel twaddle, notice what Hahnemann says on this point: "Now, as in a disease, from which no manifest exciting or maintaining cause has to be removed, we can perceive nothing but the morbid symptoms, it must (regard being had to the possibility of a miasm, and attention paid to the accessory circum-

stances) be the symptoms alone by which the disease demands and points to the remedy suited to relieve it—and, moreover, the totality of these its symptoms, *of this outwardly reflected picture of the internal essence of the disease, that is, of the affection of the vital force*, must be the principle, or the sole means, whereby the disease can make known what remedy it requires." Again he says: "Nothing is to be observed in diseases that must be removed in order to change them into health besides *the totality of their signs and symptoms*. By "signs" Hahnemann meant objective symptoms; and by "signs and symptoms," he meant objective and subjective symptoms—all the physician can observe and all the patient and his friends can tell him.

Yes, sir, "there was a time when it seemed all sufficient in the making of a Homeopathic prescription to rely entirely upon symptoms alone." And that is just as true today with all true Homeopaths. Hahnemann says there is nothing else to rely upon; that there is nothing else to be observed in diseases that must be removed. When a physician has committed to record the totality of the symptoms in a case, objective and subjective, what is left by which he can discern disease? Nothing; absolutely nothing! Hence, the founder of Homeopathy sums this question up as follows: "From this indubitable truth that besides the totality of symptoms nothing can by any means be discovered in diseases wherewith they could express their need of aid, it follows undeniably that the sum of all the symptoms in each individual case of disease must be the *sole indication*, the *sole guide* to direct us in the choice of a remedy."

Every true Homeopath accepts this, believes it will all his heart and bases his daily practice upon it; and *any man* who denies this proposition is a non-Homeopath. So you begin to see the magnitude of Hahnemann's statement, "If the physician clearly perceives what is to be cured in diseases." Now, as to "what is curative in medicines," is just as important and as little understood. This I shall notice more fully in my next letter.

Yours for pure Homeopathy.

J. C. HOLLOWAY, M. D., Galesburg, Ill.

THE SEVEN-FOLD ELEMENTS OF A REMEDY.

IT IS OFTEN SAID that our *Materia Medica* is too cumbersome—too voluminous, too massive. This is true when one tries to memorize it. Our *Materia Medica* is not to be memorized so much as to be digested and assimilated. The memorizing of

so vast a number of symptoms as is contained in our *Materia Medica* is impossible. It should be and must be mastered. Its essence must be assimilated. A very practical knowledge of each remedy is necessary.

But how can this be done most effectually and accurately? Years of study and teaching has led me to condense my work in finding and assimilating a remedy into what I have termed the *seven-fold elements*, or the *seven basilar elements of a remedy*, the mastery of which is not very difficult. This gives a practical knowledge of the remedy and makes it much easier for every day use.

These elements are :

1. What it is.
2. What it thinks.
3. What it does.
4. Its likes and dislikes, (1) general.
5. Its sensations, (2) Particular.
6. Its modalities.
7. Its tissues, (skin, nerve, glands, etc.).

Study this outline carefully, and you will observe that the second and third points are largely objective, to be obtained by carefully noting the manner in which the patient expresses his symptoms. He may throw himself into a chair in such a manner as to indicate that he never wants to move again, and tells his symptoms or answers your questions in such a sullen mood as to leave no room for doubt as to what he thinks and the manner in which he does things.

Let us now take a remedy and see how this will work. Choose anyone you desire, but for the sake of convenience let us study Aconite.

1.—*What it is:* (a) Physically it is usually a full plethoric habit, sedentary life, dark hair and eyes, rigid muscles. (b) Psychically it is very anxious, excitable, and full of fear.

2.—*What it thinks:* It thinks of death which it fears. It is unsteady in its ideas; when attempting to think one thing another forces it out of the mind and supplants it, causing confusion. The thoughts are usually sad, apprehensive, solicitous.

3.—*What it does:* You will readily see from the mental condition already expressed that it does things hurriedly and yet accomplishes very little. As in thought, so in action, it jumps from one thing to another in a restless manner without completing anything. The same fearful anxiety is shown in its actions as in its thoughts.

4.—*Its likes and dislikes:* When sick the appetite is capricious, with loathing of food predominating. Or there may

be a ravenous appetite, with hunger soon after eating. It is inclined to loathe solid food. It has great thirst for cold water and beer, but the beer is apt to produce a sensation of heaviness in the stomach.

5.—*Its sensations:* (a) General: It is very sensitive. Its pains may be a numbness and tingling all over the body, or drawing, tearing pains here and there, alternating with heart symptoms. Often the pains are as if bruised in different parts of the body. The most marked pains of a general nature are "*very fine stinging, or stinging, burning pains in many parts, as if seated in the skin.*" (b) Particular: This depends on the part or organ affected. Suppose we take the chest for example. Here we find a sensation of tightness, constriction, squeezing, pressure, oppression, or weight so severe at times that it prevents deep inspiration. They all have, practically, the same meaning and are found in acute inflammations. Then there are stitching pains with cough; every effort at coughing intensifies the stitching. Or take the head, for example, and we have confusion as if intoxicated, hence vertigo. "*Heat in head, burning headache as if the brain were agitated by boiling water.*" This in acute conditions. Fullness in the head, as if everything would come out at the forehead. Then there is the squeezing, contracted pressing and stitch-like pain in acute diseases.

6.—*Its modalities:* It is predominantly worse in the evening, at night, in a warm room, when rising up in bed, and lying on the affected side. It is worse from cold, dry west or northwest winds, from exposure to cold, and chilling when sweating. It is predominantly better when sitting up in a chair, when walking in the open or fresh air, from moistening or washing the suffering parts and from lying on the back.

7.—*Its tissues:* Acute inflammations and swellings, characterized by great sensitiveness and burning or stitching pain, a jaundiced condition of the skin in acute attacks of hepatitis, swollen and inflamed mucous tissues in acute coryza or gonorrhoea, acute inflammation of glands with burning, swelling and great sensitiveness to touch and pressure.

It seems to me that, with these seven points constantly in view, the matter of a therapeutic diagnosis will become less difficult as we study and apply our knowledge. It is not imperative that the seven be prominent in every case, but using them as a working basis in study and prescribing, apparent difficulties may be simplified. In taking or examining a case at the bedside or in the office these seven points should be kept constantly in mind and serve as a basis in both physical and therapeutic diagnosis.

G. E. DIENST, M. D., Aurora, Illinois.

SPECIAL ARTICLE

DIAGNOSIS: WHAT IS CURABLE IN DISORDERS.*

Julia C. Loos, M.D., H.M., Harrisburg, Penna.

DIAGNOSIS—the distinguishing or interpretation of a (disease) disorder from its symptoms. (*Gould's dictionary.*)

Hahnemann's "Organon."

"Precautions for the physician. § 3. If the physician clearly perceives what is to be cured in disease, that is, in every individual case of disease (indication; knowledge), if he clearly perceives what is curable in medicines, that is to say, in each individual medicine, (knowledge of medicinal powers) and if he knows how to adapt, according to clearly defined principles, what is curative in medicines to what he has discovered to be undoubtedly morbid in the patient, so that recovery must ensue—to adapt it, as much in respect to the suitability of the medicine most appropriate, according to its mode of action, to the case before him (choice of remedy, the medicine indicated), as also in respect to the exact mode of preparation and quantity of it required (proper dose), and the proper period for repeating the dose;—if finally, he knows the obstacles to recovery in each case and is aware how to remove them, so that the restoration may be permanent; then he understands how to treat judiciously and rationally.

§ 11. When a person falls ill, it is only this spiritual, self-acting vital force, everywhere present in his organism, that is primarily deranged by the dynamic influence upon it of a morbific agent, inimical to life. It is only the vital force, deranged to such an abnormal extent, that can furnish the organism with its disagreeable sensations and incline it to the irregular processes which we call disease.

§ 14. There is in the interior nothing morbid that is curable which does not make itself known to the accurately observing physician by means of morbid signs and symptoms.

§ 15. The affection of the morbidly deranged dynamis that animates our body in the invisible interior and the totality of the outwardly cognizable symptoms produced by it in the organism and representing the existing malady constitute a whole; they are one and the same.

§ 72. The diseases to which man is liable are either rapidly morbid processes of the abnormally deranged vital force, which have a tendency to finish their course more or less quickly, but always in a moderate time (acute diseases);—or they are diseases of such character that with small, imperceptible beginnings, dynamically derange the living organism, each in its own peculiar manner and cause it gradually to deviate from the healthy condition, in such a way that the automatic life energy, called vital force, whose office is to preserve the health, only opposes to them, at the commencement and during their progress, imperfect, unsuitable resistance, but is unable of itself to extinguish them, but must helplessly suffer itself

*Read before the Hahnemann Round Table of Philadelphia, Pa.

to be ever more and more deranged until at length the organism is destroyed; (chronic diseases). These are caused by infection with a chronic miasm."

Individual Consideration.

This collection of sections from Hahnemann's "Organon" present the essentials to be comprehended in any individual case of disorder. Observe throughout the teachings and writings of Hahnemann the stress placed upon the individual who is to be treated. We have nothing to do with disorders except in individuals presented for consideration. The patient appears, recounts or has recounted for him, discomforts and functional derangements and wishes to know "What is wrong with me?" "What can be done to restore me?" That we may competently answer the patient's query, it is necessary for us to comprehend the nature of the disturbances in the human race and the form and characteristics of the disturbance in the individuals.

Dynamics.

Every curable, morbid disturbance within the organism is evidenced to the observer by morbid signs and symptoms; the totality of these, together with the dynamic derangement which produced them, must be taken as one. When the dynamic derangement is eradicated there will be no further production of its evidence in symptoms. So long as these symptom evidences continue the disturbance is working within.

Without the perception of the influence of this disturbed dynamic control of sensations and functions in the organism, rational interpretation of disorder is incomplete, impossible. With this influence omitted from explanations of morbid processes, whether such processes are present in a single part of the economy or, as frequently expressed by the materialist, in a "complication of diseases," the explanations are incomplete and unsatisfactory to those who seek the reason for what is in evidence.

The man within the house is disturbed, the force that should keep the body in repair is disturbed, "when a person falls ill." When inflammations occur and persist, when abscesses develop, when tubercular deposits surround ulcerated areas, when animal tissues decay and form suitable feeding ground for various forms of bacteria, when the serum of the tissues does not sufficiently cater to the cells naturally expected to appropriate invading bacteria, by preparing these invaders for ingestion, then is there some disturbance of the dynamic force. It is the business of this force to rule with unbounded sway and retain all the parts of

the organism in admirable, harmonious, vital operation, as regards both sensations and functions so that our reason-gifted, indwelling mind can freely employ this living, healthy instrument for the higher purposes of our existence."

No keener, more complete, more rational, grander conception of health has been expressed in all the three quarters of a century since Hahnemann penned this ninth section of the "Organon." All explanations or attempts at diagnosis, whether elaborate or simple, are insufficient if they neglect the internal controlling force.

What is curable? This derangement is curable. The man, the tenant of the house, is the deranged and the curable part. When the curative process is instituted in this disordered controlling force, response in the sensations and functions accompany it. Disagreeable sensations and morbid processes become orderly and more nearly normal and if the process be continued, normal restoration results. When the dynamic influence which affected the vital force has been antidoted, when the power which touched the button has been banished, pains will decrease, inflammations will subside, destruction of tissues will cease and repair be instituted as the brain force radiates to control the functions for the benefit and not the destruction of the organism.

How is the physician to perceive the nature of derangement in any individual case of disorder? What are the symptoms which interpret the disorder, which *distinguish the case* of disorder present?

Acute and Chronic Miasms

There are two classes of disorder to which man is liable; acute and chronic. The course and distinguishing features of these must be familiar to the physician. In the event of either form it is primarily a derangement of the vital force by the dynamic influence of some morbific agent which furnishes the organism its disagreeable sensations, its irregular functional action, inaction or overaction, its degenerate tissue formation with disintegration or excessive formation. The power behind the evidence is to be dealt with and that power is more subtle than bacteria that feed on devitalized animal tissue or the excretions of these organisms. Hahnemann perceived this and expressed it again in § 16: "Our vital force cannot be attacked and affected by injurious influences on the healthy organism, caused by external inimical forces that disturb the harmonious play of life, otherwise than in a dynamic (spirit-like) manner."

That must be conquered or the irregular functions and disagreeable sensations may be continued or repeated despite the removal of morbid tissue products, evacuation of pus cavities, spraying of mucus membranes and slaughter of bacteria.

Until Hahnemann made his thorough investigation into the forms of disorder manifested in the human race and classified them by their nature, acute and chronic disorders were in confusion in the thought of all, both laity and profession. After twelve years of study of morbid conditions, he presented to the world the rational method of investigating their processes. Through his introduction to an illumined field, the scope and power of these disturbances is clear and comprehensive and acquaintance with them is afforded, which makes it possible for us not only to recognize them, but master them instead of remaining blindly mastered by them.

Acute miasms are characterized by invasion, periods of prodrome (the time before the external evidence appears) progress and decline, ending in recovery of the patient. They are self limited in duration and each has its characteristic symptoms in the various periods. Chronic miasms have the similar periods, invasion, prodrome, progress, but no period of decline, as they do not leave the patient after infection, unless influenced by some other dynamic force which checks them. When this conception is adopted we perceive that disorders are not acute and later develop into chronic type but, each miasm is acute or chronic in its nature in the very beginning. The continuance or recurrence of the same groups of symptoms is really the evidence that same underlying disorder permits such persistence.

Susceptibility to acute miasms is an evidence of chronic disorder. It is because of the existing disturbance in the economy that such influences can affect him and poison his system. Were the vital control not disturbed, instead of being sensitive to such disturbance, we should resist and vanquish them without suffering from their ravages.

We also recognize that when the patient is overwhelmed by the self-limited disorders which in their nature permit and include decline of the disturbance and recovery of the victim, so that the disorder is violent enough to occasion death, it is because the chronic disorder was too intense to afford resistance of the economy. When vital control is too weak, the added infection of the acute miasm is sufficient to prevent the continued action of the vital functions, supplying nutrition, repair and elimination and the machinery of the bodily mechanism is prevented from

operation. Then the patient succumbs to pneumonia, scarlet fever, diphtheria, etc.

Contrary to the old-time materialist conception of acute miasms which declared that these self-limited disorders must run their course and nothing could check them, now we know that, by the operation of the law of cure, the suitable, indicated remedy will cut short the progress of, and annihilate the disturbance resulting from, the acute miasms. When the siege is a violent one and threatens to destroy the functions and result in death, the remedy, selected according to the law of cure, transforms the violent into a mild form when it cannot check the progress in the early periods.

We now know that the weakness and disorders so often remaining after the subsidence of the acute miasms, called sequela of the acute disorders, are really the evidence of chronic disorder, previously latent in the system, aroused to activity by the invasion of the acute miasm and the resistance offered to that by the vitality. Delayed convalescence, cough remaining after pneumonia, ear inflammation after scarlet fever, irregular evacuations after typhoid fever are expressions of the underlying chronic miasm, to be included with other evidences of the same. It sometimes occurs that the resistance offered by the vitality to the acute miasm arouses the economy enough to overcome formerly existing weakness or disturbed functions, leaving the patient after an acute disorder in apparently better condition than before.

It is a recognized part of every medical student's training to become familiar with the symptoms, course, duration and termination of each of the self-limited disorders. The avenue of communication and infection and the bacteria associated with each disorder is expected to be learned. So much importance has been given the specific associated bacteria that we are expected to rely on them to determine the name of the disorders. Such dependence becomes more and more unwarranted and dubious as extended observation renders them evidently unreliable. In more than one form of disorder the presence of the organism has not been found or found too late in the progress of the case and in other instances, where there was no other suggestion of that sickness, the organism exists. So it proves useless as a practical determining factor.

Familiarity with the three chronic miasms is as essential to the preparation of the physician for his duties as is familiarity with the acute disorders. They should be known in their symptom expression, the manner of contagion, the course and progress

when uninterrupted, also the course and progress when the manifestations are suppressed. If there were any difference in the importance of the two classes, comprehension of the chronic miasms is vastly more important because these disorders are deeper, more common and far reaching in their influence.

Space does not permit any extensive discussion of these here and nothing short of study such as presented in Hahnemann's "Chronic Diseases" is adequate to their comprehension. In every case of sickness not suffering some acute miasm are to be found evidences of one or more of these miasms: psora, syphilis or sycosis. So long as these internal disorders are not eradicated they will be transmitted to offspring, in whom the expressions are repeated, first upon the externals. So often as the external symptoms and affections are suppressed without correction of the occasion of them, internally, the functions and organs nearer and nearer the vital ones are involved, menacing the existence of the individual. Familiarity with the nature of these and their expression on the human race must be aided by investigation of the evidences throughout the life of the individual, including occupation, habits, social and domestic relations and heredity. The relation and source of these various affections in an individual appear uncertain and indefinite until viewed in the light of Hahnemann's exposition, but with that aid, recognition of what is curable and how, in each individual, becomes clearer and simpler.

Individual Characteristics.

The symptoms which characterize the form of disorder, which determine the presence of measles, scarlet fever, typhoid fever, syphilis, or any one of the acute or chronic miasms are important to the physician, but there are other symptoms which are no less valuable. How frequently do we find different patients suffering from the same disorder, affected precisely the same in all ways? The varieties of effects on different individuals are numerous. The casual observer, who has no professional interest in the patients, easily realizes that John, Mary, Alice and Ralph act very differently, desire different attention, are affected differently by circumstances, when they all have the same infection; measles, whooping cough, diphtheria or whatever it may be. Conditions which make one patient comfortable distress another; one is cheerful and another depressed, and others irritable and scolding, even may be violent in manner. There is as much difference in their desires for food and water, for heat and cold, for activity. These are the characterizing symp-

toms of the individual. They strongly express the man, woman or child.

Such individual characteristics include the mental (including emotional) symptoms, the functional disorders and sensations which are not essentially a part of the acute miasm or the chief disturbance (not common to measles, if that is the disturbance, or common to inflammation of kidneys or stomach if these are the affections, not diagnostic of malaria or typhoid, in these disturbances). They include also the peculiarities, the strange features of the symptoms which are common and diagnostic of the disorder (such as thirstlessness in fever, painlessness in inflammation, etc.), peculiarities of discharge, (color, consistence, odor, etc.), alterations from the normal qualities in secretions and excretions and finally the circumstances of amelioration and aggravation of the patient and his symptoms—the modalities.

Morbid Anatomy.

Lastly and not firstly, are to be considered the alterations in the tissues of the body, the morbid anatomy. In this, the materialist and the dynamist differ. The materialist seeks to determine the nature of the patient's disorder by ascertaining what changes have occurred in the anatomical tissue formation. When he finds evidence of hardening in tissues that should be soft, softening in tissues that should be hard, enlargement of joints, lack of repair, resulting in degeneration, increase in any structures beyond the functional needs, he is prepared to make a diagnosis. Yes, here we have sclerosis or fibroid of an organ, ulceration, tuberculosis or cancer of this or that, enlargement or tumor or gout, etc., etc. When he does not discover some tissue change from normal he declares there is nothing really wrong with the patient, all the organs are in good health; there is *only functional derangement*, regardless of the fact that discomfort and functional disturbance have persisted for months, perhaps for years, in one part or another.

The physician who recognizes the value of vital control operating the body and its functions knows that the man within, the tenant of this body, has been disturbed and in disorder long before the appearance of these tissue changes. He perceives

these changes to be the late developments in the course of deep-seated disorder. He knows that lack of nutrition and destruction of the machinery could not result (in a normal environment) if the controlling force were in order. The presence of these changes in not to be disregarded, but form a part of the estimation of what is curable, for they express the extent of disturbance in the house of the man who is to be treated.

Curability—Its Factors.

When these evidences are all collected, the physician has a basis on which to estimate the power of vitality of the individual, what conditions of the body are results of mechanical injury or interference, what are the results of continued dynamic disturbances and the power of the body to undergo elimination and repair.

All these things are to be included for the perception of the physician as to the nature of the derangement; first to distinguish in the individual the acute and chronic miasms; second, distinguish the special form of miasm; third, distinguish the characteristics of the patient, the individual; fourth, distinguish the morbid anatomy. From these, what is curable and the progress during cure are to be determined. To know how the curative action will proceed and its evidence is but a corollary of the knowledge of what is curable.

It has been supposed by many that a patient advanced in years must be expected to suffer and have small relief, but it certainly is as much the privilege of older ones to be in order as it is for younger ones. It has been supposed that young people outgrow disorder. This is not consistent with the preceding supposition and is not more rational. If a child is in disorder, that disorder remains until it is corrected and demands the attention of the physician as truly as older ones. It has been supposed that when morbid tissue changes occur the part affected should be removed to avoid making the patient sick. As previously remarked, investigation reveals that morbid tissue change is the result of disorder within and it is therefore perfectly rational to suppose that restored order can undo what disorder has created except in cases of actual destruction. What has been

altered under vital control has been again altered under vital control in orderly operation, instituted by curative remedies. If the parts be removed, the vital control may be as powerful as before, to create similar changes unless that disorder be corrected. Thus old people, young people and those with demonstrable tissue change, we perceive are under the vital controlling force, which is the thing always to be considered in relation to cure of the patient.

No wise physician, student of dynamic action in health and disorder will undertake to declare that any specific form of disorder, tuberculosis, pneumonia, sycosis, or any other, is curable or incurable. He will wisely judge the elements in each case presented, estimating the curability of each according to the dynamic force, the relation of the expressed symptomatology to his *materia medica* and the obstacles to be removed from the individual case.

To assume that the existence of syphilis, in any period of its course, determines an individual beyond the realm of curative action is contrary to the doctrines on which the law of cure is based. To say that any individual suffering from syphilis or sycosis must always be so afflicted, whether the disorder be acquired or inherited, is contrary to the true physicians' guide, unless there are factors in the individual case of disorder which determine it an incurable case.

Measured by the standard of "The Organon," "Materia Medica Pura" and "Chronic Diseases," safe and reliable valuation may be made, of all theories presented, all remedial methods advocated and forms of prognosis. Is this thing proposed consistent with the doctrines which have been demonstrated and verified, Truth? If so follow it through to its conclusion and prove its power. Are these things inconsistent or partially inconsistent with the doctrines which are the basis of rational treatment and expectation? If so, they may be as beneficial consigned to the rubbish heap as put into operation. It is folly to discard Truth for partial truth or falsehood.

(In a subsequent paper will be discussed some clinical illustrations and the obstacles to recovery).

S E L E C T E D

THE PASSING OF THE DENVER COLLEGE OF PHYSICIANS AND SURGEONS.

ESTABLISHED in the interest of the advancement of medicine, maintained through fifteen years of patient, loyal effort on the part of many physicians, it is the same devotion that now makes these men bring to a close the life of the Denver College of Physicians and Surgeons—the entire unwillingness to have any but the best standard of requirements for both students and faculty.

The decision of the board of directors to close the school, so long known as the Denver Homeopathic College, was the result of several conditions: The progress of medical science during the past decade has been very great. "The old order changes, yielding place to new." Fields of investigation have opened up in many directions; subjects entirely new have come to the front and are demanding a hearing; new methods of investigation have been discovered, and the thirst for knowledge has become a veritable contagion. The medical world is engaged in a great advance movement, and medical colleges, whose mission it is to stand at the front and open their doors to the latest and best, have been compelled to abandon the methods of the past and recast their curricula in harmony with present day ideas. This is the duty of every institution that opens its doors to medical study.

As a consequence of this new condition, the cost of educational work of this class has advanced so rapidly and to such a degree that only colleges with ample endowments can meet the demand for a complete medical education. The work of the first and second years requires an expensive equipment in laboratories and in instruments of precision for scientific study. These are necessary, and the college without them suffers a severe handicap. It is also true that men qualified to teach these branches cannot be secured without some adequate compensation.

The Denver College has no endowment; the men of the faculty have worked loyally without financial gain; the laboratory equipment has been fairly good, but the time had come when the many demands could not be met without greater financial outlay than present conditions and future prospects seemed to justify.

The increased preliminary requirements now adopted have markedly affected the attendance of students. All medical schools of first rank demand a full high school course as a requirement for entrance, and the trend the country over is for still higher standards. Many colleges demand now that their entering freshmen shall have had at least one year in a college of liberal arts, and some require two years. Other callings that offer more lucrative returns and in shorter time, have attracted young men that might otherwise have studied medicine. The Denver College of Physicians and Surgeons has suffered at this point, but it has not suffered alone. Last year a number of the regular schools closed their doors, while others found it convenient to combine with some other similar institution, and the old Homeopathic Medical College of Missouri, with a record of fifty years of honorable work, found itself unable to meet the new demands of the time and modestly closed its doors. The attendance for the past few years has been on the decrease, owing to all these causes, and this year was still further reduced, so that continued existence did not seem wise.

The men who have carried the burdens of this school for fifteen years deeply regret the condition that makes necessary the closing of their institution, while at the same time they are in fullest sympathy with the trend of advancement along the line of medical education. There have been times of storm and stress during its existence, but for the past six or eight years there has been a spirit of perfect harmony among the members of the faculty and the board of directors. The student body, while small, has been loyal, and the alumni roll is full of names that do their alma mater credit. For several years the teaching force of the college has been augmented by the presence of a number of physicians of the regular school of medicine, whose work has been of a high order of excellence and has helped much in maintaining the efficiency of the college, and it is with pleasure that we record the splendid spirit of professional liberality and gentlemanly conduct that characterized them at all times.

Now that the time has come to close the old school, there is a feeling of keen regret, but with it is the compensating thought of efforts honestly made and work well done.—*Progress.*

CONTRIBUTED

A. I. H.

CLEVELAND, O., Nov. 15, 1909.

TO THE EDITOR: The regular semi-annual meeting of the Board of Trustees of the American Institute of Homeopathy has been ordered by the President for December 18, 1909. The sessions of the board will be held in the Hollenden Hotel, Cleveland, O., beginning at 10 o'clock in the morning. Most important matters are to be considered and the attendance of each member is earnestly requested.

By order of the President.

J. RICHIEY HORNER, SECRETARY.

Greetings from the Transportation Committee to the Members of the American Institute of Homeopathy.

IT BEING THE PURPOSE of the Committee on Transportation appointed by President Ward to do everything in its power toward affording the members a pleasant and profitable trip to California next summer, it is the desire that the views and wishes of the members in regard to an itinerary shall be made known at the earliest practicable moment. Nothing can be done toward selecting a route until after the February meeting of the Western Passenger Association, which shall determine whether we shall be favored with a reduced rate for the journey, nor is it the intention of the committee to at any time act fully upon its own initiative in this regard, much less to act arbitrarily, it having been hinted that the committee may be influenced by the road or roads which may grant transportation favors to its members, it is now time to state with an emphasis which shall be emphatic, that under no consideration will the committee act for the Institute upon selfish or individual motives. The good and pleasure of the body is the committee's desire.

Therefore, please indicate to the Secretary, Dr. T. E. Costain, 42 Madison street, Chicago, any preference that may be entertained in relation to going route. It is expected that we will scatter for the return, there being many Pacific Coast attractions of which the members will probably want to avail themselves, in small groups or individual parties; but it is the wish and hope that we may be able to "get together" for the outgoing journey, as for Denver in 1894. Members are requested to indicate to Dr. Costain by letter or post card just which route each may

desire to travel, and the fullest and freest discussion of the subject through the journals is invited and will be fully considered when the time comes for a choice of roads and routes.

The Santa Fe goes direct from Chicago and Kansas City to Los Angeles, and is the only road giving a chance to see the Grand Canyon of Colorado en route, by a side trip from its main line. This is the essence of the Santa Fe's attraction, other than its excellent train service and its journey through the wheat belt and corn fields of Kansas. Unless the season should be unusually cool the Santa Fe will prove a warm route across the deserts.

As far as Denver we have, besides the Santa Fe, the Rock Island, the Missouri Pacific, the Burlington and the Union Pacific. The five are good roads, a toss-up between them.

The Union Pacific would take us either over the Northwestern or the Milwaukee & St. Paul as far as Omaha, then to Denver on its own line, without change of sleepers, of course, between Chicago and Denver.

The Burlington can take us to Denver over its own line via Omaha and Lincoln.

The Santa Fe can take us by way of Kansas City, as also the Rock Island, and for the Missouri Pacific we would have either of the others from Chicago and also the Alton as far as Kansas City. All of these roads have practically an equal service as to sleepers and dining cars as far as the Colorado metropolis.

The trouble is from Denver on. If we want the Grand Canyon of the Colorado going, we must go via the Santa Fe, hot or no hot.

If we would go further via the Union Pacific we must go up to Cheyenne and on to Ogden through Wyoming and Utah, a splendid roadway, fine service and some scenery. Whereas, if we want the Royal Gorge, Glenwood Springs, Castle Gate, etc., and then Salt Lake, we must go from Denver via the Denver & Rio Grande.

If we would climb Marshall Pass, 10,800 feet, the highest railway point in this country, and go through the Black Canyon of the Gunnison, viewing the government's great irrigation tunnel, just opened by President Taft, then we must leave the main line of the Denver & Rio Grande after going through the Royal Gorge, and take the narrow gauge of the same line via Marshall Pass, Gunnison and Montrose to Grand Junction, where we will again strike the main line to Salt Lake. From there it would be over the new Los Angeles, San Pedro and Salt Lake road, the Clark Road, to Los Angeles.

If we would do the Royal Gorge on the Rio Grande road and also the Grand Canyon of the Colorado, we might run out

through the Gorge and back to Pueblo, there taking the Santa Fe on to the Grand Canyon and Los Angeles. Those who wish to take a side trip of a day from Denver to see the celebrated scenery on the new "Moffat Road" should say so. Likewise those who would like to loop the Georgetown Loop from Denver, which the Institute looped in 1894.

From Colorado Springs, if we want to stop there a few hours, the Garden of the Gods and a trip to Pike's Peak are offered.

From this resumé, rather lengthy, though brief as can be given, it will be seen that the Transportation Committee has no small task before it. It simply cannot hope to please everybody. But it will do the best it can toward this end if the everybodies will let it know their wishes, as requested. Pass them on at once, without delay, that we may poll the members' views fairly and fully.

For the return the Committee will try to make an arrangement which will enable those who wish to return at once to their work to come back in a body if there shall be any considerable number of these.

On the Coast there will be worth considering the following; as also others to be developed.

The Mount Lowe and Santa Catalina Islands trips.

The visit to San Diego, and from there up the Coast by steamship.

The beautiful Santa Barbara itinerary, and the no less beautiful and interesting journey to Monterey, which can be continued from Santa Barbara or made known from San Francisco, through San Jose.

The Southern Pacific itinerary over the Tehachapec mountains and through the splendid valley of the Fresno across the Mojave desert if cactus and other desert flora are desired.

From San Francisco the Shasta Route to Portland, Tacoma and Seattle will be exploited and recommended as worthy of all of us.

The various exquisite suburban cities and villas of San Francisco and the truly marvelous views from Mt. Temalpais will engage and delight those who will take them in their itineraries, and the side journeys to Lake Tahoe, to the Yosemite, up the Sacramento Valley, and others here not enumerated, will give to the Institute a variety of post-session entertainment it can get no where else in the United States.

It will be seen at a glance that the Transportation Committee cannot be expected to cover the necessary details for any great part of the after-meeting outings, but it is putting itself

in touch with the managements of the various lines and attractions and will render all the service in its power. Our first aim is to get the Institute to California pleasantly and with satisfaction to the greatest number. We are not mind readers, we need the members' help. Give us this freely, fully and fairly, and we will in turn render you our best possible efforts toward our own special trains, our own side-trips going, if it is possible to do so, and to get the Institute to California with the greatest degree of comfort and enjoyment en route of which we are capable.

For the Committee,

C. E. FISHER, M. D., Chairman.

T. E. COSTAIN, M. D., Secretary.

CORRESPONDENCE

CHICAGO LETTER.

DR. J. B. FRANCIS, Hahn. '08, has located in Dixon, Ill. Dr. R. O. Howard, Hahn. '09, of Winfield, Kans., was married about Nov. 1st.

Dr. R. L. Barr, Hahn. '08, Holly, N. Y., recently got the appendicitis fad and had a surgical operation.

Dr. R. W. Hewlitt, Hahn, '09, is serving as interne in the Hahnemann Hospital of Chicago, taking the place of Dr. Lovell.

Dr. Josephine M. Roberts, wife of Dr. T. G. Roberts, of Hering College, died Monday, Nov. 8th, after several months' illness.

Dr. G. H. Grieves, Hahn. '09, has given up his internship at Philadelphia, Pa., and gone to the Boston Homeopathic Hospital.

Dr. Howard C. Boyer, Hering '95, and Dr. J. V. Blood, Hering '05, are doing post graduate work in Hahneman College this winter.

Dr. W. A. Thompson, Hahn. '10, recently made a trip to New York City as a delegate to the Phi Alpha Gamma fraternity convention.

Dr. J. K. Stewart, Hahn. '10, has gone to Cincinnati, Ohio, as delegate to the Alpha Sigma Fraternity convention, held Nov. 21st to 23rd.

Dr. Florence Phillips, Hahn. '10, was called home early in November on account of the illness of her mother, who is now reported improving.

Chicago, Ill., November 17, 1909.



EDITORIAL SECTION

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Communications intended for publication, books for review, exchanges, etc., should be addressed to the Managing Editor, Majestic Building.

All remittances, inquiries for advertising rates and space, orders for extra copies and reprints, changes of address, etc., should be addressed to the Business Manager, Steele Block.

No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.

THE VERY LARGEST. With kind permission of Mr. J. A. McGuire, managing editor of *Outdoor Life*, I am permitted to print a very classy picture, which shows the enormous proportions of a grizzly bear, the largest ever brought to the United States, killed by Dr. J. Wylie Anderson during his recent hunting trip to the Unimak Islands. The marvelous thing connected with the picture itself is the fact of its being "snapped" at 9:30 in the evening.

The following article, taken from the *Denver Post*, October 12th, will give a pretty fair idea of the animal:

"The biggest grizzly bear ever brought into the United States was killed by Dr. J. Wylie Anderson, a Denver man, while on a hunting trip to Alaska this summer, and its mounted skin, the largest in the world, and valued at \$2,000, is now on exhibition in the Sixteenth street window of the May Clothing Company, where it is attracting admiring thousands.

"The skin, which is a magnificent specimen, measures 11 feet from tip to tip. The head is two feet across from ear to ear, and the skull measures two and one-half feet from its base to the point of the nose.

"In life Mr. Grizzly weighed 1,325 pounds, more than many of the largest horses seen on the streets of Denver, and Dr. Anderson killed it with four shots from a 30-caliber rifle.

"The bear, known to naturalists as *ursus gyas*, or the grizzly of Alaska, was killed by Dr. Anderson on Unimak island, May 31, of this year. The doctor was alone when he came upon the ferocious monster, his guide having left him in the hope of stirring up some big game.

"The first shot struck the grizzly in the jaw and brought him to the ground. In another instant he was on his feet and charging upon the intrepid nimrod.

"A second shot caught him right under the shoulder blade and turned his course into a clump of bushes. Again Dr. Anderson fired, this time missing as the bear was hidden from view. The third shot brought the bear into the open again. Once more the Winchester cracked and this time the deadly missile struck the spine, killing bruin instantly.

"While Dr. Anderson was on his way home with this magnificent trophy of the chase he stopped in Seattle, and the management of the fair offered to have the skin mounted for him if he would only leave it there on exhibition, declaring it was the largest ever seen in this country.

"Dr. Anderson was accompanied on the hunting trip to Alaska by Attorney J. S. Williams, of this city."

NOT WHOLLY UNEXPECTED. Elsewhere THE CRITIQUE publishes an article from *Progress*; it is quite evident that the writer thereof calculates it will serve as a complete and conclusive disposition of the question of why the College of Physicians and Surgeons, formerly Denver Homeopathic, was forced to close its doors and throw up the sponge.

The explanation is elaborate and no doubt eminently satisfactory to those for whose particular edification it was written, yet as one who has watched the wanderings of this institution since it drifted away from Homeopathy, I cannot help thinking the story incomplete and inconsistent and if it were possible for

the same to secure any standing whatever through the medium selected for its dissemination, I would not bore my readers by repeating it.

The collapse of this concern has not been wholly unexpected by THE CRITIQUE, and were it not that the wreck caused by the weakness of those who now come forward and humbly pose as bearers of the burden of loyalty and patience (covering a period of *fifteen years*) is a price too great to pay for the vindication of prophecy, I might be tempted to say: "I told you so."

The ambiguous attitude of the article is evident from the very first line: "Established in the interest of the advancement of medicine" sounds good, and no doubt would suffice were it not for the fact that the saving grace of the situation is lost sight of by the intentional omission of the word "Homeopathic" from the prospectus.

The prime reason for organization of this institution, *fifteen years ago*, was the promotion of *Homeopathy*; not, necessarily, in this particular region, but as an adjunct to its general dissemination, and the prime reason for its coming to so untimely an end at this time can be attributed to no other cause than the failure to adhere strictly to the purposes for which it was created. That the latter statement may be substantiated, I need only divide the history of the college into cycles of five years each:

During the first five years of its existence was witnessed the wonderful increase of the student body from twenty-five to fifty-three. In all this time there was nothing thought of and nothing taught but *Homeopathy*. It was, in deed and in fact, a strictly *Homeopathic* institution. Its prospects grew brighter and brighter with each succeeding year and notwithstanding the fact that fields of investigation opened up in many directions; subjects entirely new came to the front continually and demanded an audience; that new methods were discovered and that the thirst for knowledge had become a veritable epidemic, it kept right up with the procession of advancement and at the end of this period, stood as solidly established as any institution in the country.

Then came a period, covering another five years, during which, while its name still showed Homeopathic, there were internal dissents and departures from its original objective, and, notwithstanding its claim to up-to-dateness in every department, the attendance of students, at the termination of this second five-year term, had dropped to less than its original patronage.

The last five years of its struggle for existence intensified rather than diminished the general feeling of disapproval towards its persistent and pernicious predilection to carry water on both shoulders, and it was looked upon more in the light of a luminous laugh promoter than anything resembling a medical college. During this time it changed its name no less than three times, but with each shift came no nearer returning to the fold than though "Homeopathy" was a word unheard of.

Notwithstanding its wanderings and weaknesses, a member of the Intercollegiate committee of the American Institute placed the (his) brand of approval on the institution and then—it died. Sad, isn't it?

The hospital which now goes under the name of "Park Avenue" was a part of the original incorporation and represented the principal asset of the association. There was, in addition, a sinking fund, a free-bed fund and other resources, but just what has become of all this or what will become of the hospital building and ground, is a question the solving of which no one cares to undertake.

It is quite evident that the "loyal effort on the part of many physicians," to which *Progress* refers with so much feeling, may have been misdirected, but if it is any satisfaction to that shining example of loyalty to *Homeopathy* to regard the ultimate results as "efforts honestly made and work well done," why I am willing to let it go at that.

Personally I am sorry the *old* college has gone, but as its successor has been dead to *Homeopathy* for several years, the severity of the shock of its actual passing out is softened somewhat by the thought that *Homeopathy still lives*, and that in Denver even it is not entirely wiped out.

M.



Miscellaneous Matter



Send Us a Personal Item Occasionally

Commence on that 1910 flourish for all correspondence.

* * *

We learn there is a movement on foot to revive the Denver Homeopathic Medical College.

* * *

Colorado Medicine, for November, appears in a new shirt, or rather cover. Mechanically, it presents a very pleasing appearance.

* * *

With our next issue **The Critique** will commence its seventeenth year of publication. Pretty good record, inasmuch as it still sticks to similia.

* * *

"It is rumored" new buildings will be erected to accommodate the growing requirements for room of the Denver-Gross Medical college. Really?

* * *

It is a pleasure to announce "the class of 1913 is the largest in the history of the New York Homeopathic Medical College." We take this information from **The Chironian**.

* * *

The ex-president of the Colorado Homeopathy Society has resigned therefrom as well as the practice of medicine, and will hereafter devote his energies along other lines of human endeavor.

* * *

Now that the Denver College of Physicians and Surgeons has passed on, wonder what will become of the hospital property, which was formerly a homeopathic institution? **The Critique** will look this matter up.

* * *

Someone has sent us the following query: "Where is the H. C. Allen Memorial Hospital, for which funds were collected, after his death?" No doubt the editor of **Medical Advance** could give the desired information.

* * *

Mrs. Mary Schneider, of Philadelphia, committed suicide October 31st. After this event doctors at the hospital where she was taken performed caesarian operation and saved her baby's life. The mother used carbolic acid to end her own existence.

* * *

We are indebted to the secretary of the Southern Homeopathic Medical Association for a beautiful pictorial pamphlet setting forth the delights of Hot Springs, Ark. The meeting of this association, held at this point last month, was a hummer.

* * *

The Critique desires to call attention to "Greetings from the Transportation Committee to the Members of the American Institute of Homeopathy." This document is signed jointly by Dr. Fisher, chairman, and Dr. Costain, secretary, and shows that both gentlemen are on the job.

Announcements of the wedding of Miss Ruth Elaine Crittenden, a former popular nurse of this city, has been received. Mr. Bruno Schroeder is the happy groom and the wedding took place at Glen-garey, Idaho. **The Critique** extends the customary congratulations and well wishes.

* * *

Mr. Sumner S. Jennison, representing Fairchild Brothers & Foster, was an agreeable visitor at the editorial offices of **The Critique** the fore part of last month. This is one of the examples where a reliable man represents a reliable firm which manufactures reliable preparations. Sufficiency.

* * *

It is up to all those who contemplate attending the 1910 meeting of the American Institute of Homeopathy to remember the date: July 11-16, 1910. If all such will let the transportation committee know their pleasure in the matter an effort will be made to select an "official route" which will please the majority.

* * *

Brother Dale King, of **Medical Counselor**, has been having a hard time during the past year in making his magazine match up in its date of publication to conform to the actual date of issue. We are glad to see he has almost caught step, and while a little late in getting there **The Counselor** has been "worth waiting for."

* * *

In Chicago the health department has ordered all garbage doped so as to prevent disease spreading from eating of the same. If the poor eat the garbage it will kill them and in many cases if they do not they will starve to death. That is what we call being between the devil and the deep sea with no particular preference for which way you face.

* * *

Dr. Charles N. Crittenton, senior member of the firm of Crittenton & Co., wholesale druggists, of New York, and founder of the Florence Crittenton Homes, for aiding girls of the slums, died in San Francisco, Cal., the 16th of last month, while on a tour of inspection of the institutions which had been established through his philanthropy. He was 76 years of age.

* * *

The Chicago Homeopathic Medical Society and the Regular Homeopathic Medical Society, of Chicago, have entered into a joint program arrangement which makes the meetings of these two organizations of much value to the profession in the windy city. All meetings are held in the Public Library building, and the combination, so far, has proved of vast benefit to all, and in addition insures a liberal attendance.

* * *

Appendicitis is given as the cause for scarcity of turkey meat with which to supply the demand during Thanksgiving and other holidays. This bright bit of brain explosion comes from scientists at Harvard, so there need be no particular cause for alarm if you happen to have the price. If the condition gets worse, that is so far as price is concerned, it will make very little difference whether it be appendicitis for the turk or apoplexy for the toiler,

* * *

Gleaning our information from a full-page, next-to-reading-matter ad in November number of **Journal of the American Institute of**

Homeopathy, we learn that **Medical Century** will resume publication January 1st, 1910, with Dr. W. A. Dewey editor and Dr. William Boericke, of San Francisco, associate editor. It will represent the homeopathic profession of the United States; it will stand where it formerly stood, as the only homeopathic periodical in the United States, not local in character, and, my goodness, a whole lot of other things too numerous to mention.

* * *

Dr. Daniel A. Lucy, who resides at 3505 Navajo street, Denver, was called from a warm bed the last night of October to visit a man with a hemorrhage. On arriving at the point where the "poor fellow" was, he confronted a pistol in the hands of a very-much-well highwayman, who demanded the doctor's dough. The doctor was fortunate enough to have but seventy-five cents on his person, which was all the hold-up man got for his efforts. It is not definitely decided whether, in case the bad man had a hemorrhage after the seance with the doctor, but what there was was good and sufficient reasons for the same.

* * *

The American Journal of Surgery will produce in December a **Philadelphia** issue of their journal, the subject matter of which will be composed entirely of contributions from among the leading men of that city. Among the subjects to appear and their contributors are as follows: "A Consideration of the Diagnosis and Treatment of Retro Displacement of the Uterus," by E. E. Montgomery, M. D., Professor of Gynecology, Jefferson Medical College; "Polypoid Growth of the Rectum and Report of a Recent Case," by Lewis Adler, Jr., M. D., Professor of Diseases of the Rectum, Philadelphia Polyclinic; "Tumors of the Urethra in Women," by Barton Cooke Hirst, M. D., Professor of Obstetrics, University of Pennsylvania; "The Control of Hemorrhage During Pregnancy," by Edward P. Davis, M. D., Professor of Obstetrics, Jefferson Medical College; "Cyclo-dialysis," by Walter L. Pyle, A. M., M. D., Ophthalmologist to the Mt. Sinai Hospital, Assistant Surgeon of Willis Eye Hospital, etc.; "Roentgen Treatment of Malignant Diseases," by Charles Lester Leonard, A. M., M. D., ex-President of the American Roentgen Ray Society; "The Conservation of the Middle Turbinated Body," by William A. Hitschler, M. D.; "The Diagnosis and Treatment of Ectopic Pregnancy," by F. Brooke Bland, M. D. The following well known surgeons will also contribute and their titles will be announced at a later date: Ernest La Place, A. B., A. M., M. D., Professor of Surgery, Medical Chirurgical College; Prof. William Campbell Posey, Professor of Ophthalmology, Philadelphia Polyclinic; John G. Clark, M. D., Professor of Gynecology, University of Pennsylvania; H. M. Christian, M. D., Clinical Professor of Genito-Urinary Diseases, Medical Chirurgical College; John A. McGlinn, A. M., M. D., and others.

READING NOTICES

Of Interest to Everybody

MEATOX.—Meatox, combined with malted milk, is a preparation put up by Charles Marchand of New York. The beauty of this preparation, in addition to its value as a food product and blood builder, is that it keeps fresh indefinitely and is easily digested by a weak stomach where all other foods are rejected. The fact of its bearing the signature of "Charles Marchand" is sufficient guarantee of its purity and reliability.

* * *

RELIABLE HOMEOPATHIC REMEDIES.—Every once in a while someone asks The Critique editor where they may buy good, reliable, homeopathic preparations. To all such we invariably reply: "At A. G. Clark & Co.'s store, Albany Hotel, and be sure to ask for B. & T. goods." The latter precaution is hardly necessary, inasmuch as this firm handle only this one brand of homeopathic preparations.

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THE LATEST ECLECTIC BOOKS.—We desire to call attention to the advertisement to be found in our advertising section and which bears the foregoing head. Scudder Brothers Company, Cincinnati, stands for the very best in this line and any of our patrons desiring to secure literature of this description will make no mistake when patronizing the above named firm.



PRIMER OF SANITATION.—The World Book Company, Yonkers-on-Hudson, New York, have issued recently a work upon this subject which is the only thing of the kind suitable for school service. Regarding the same, Dr. David P. Barrows, director of education, Manila, P. I., says: "It is, in fact, one of the most interesting text-books I have ever had the privilege of examining."

* * *

GASTRO-INTESTINAL ANEMIA.—From a strictly scientific standpoint, the heading of this clinical note is no doubt incorrect, or at least faulty, as there can scarcely be said to be a true anemia, due to gastro-intestinal disease, that can be morphologically differentiated from the anemia which is secondary to other devitalizing disorders. At the same time, it is undoubtedly true that gastro-enteric disease, even the common functional dyspepsia, if sufficiently long continued, is productive of an anemic blood condition. It is a well recognized fact that auto-toxemia, resulting from the constitu-

tional absorption of the products of intestinal putrefaction, is not infrequently followed by a generally devitalized condition of the circulating fluid. In such cases, while attention should primarily be directed to the gastro-enteric condition, the anemia should also be treated, in order to induce recovery in the shortest possible period of time. Care should be taken to avoid the administration of drugs that tend to derange the digestion. For this reason, the inorganic metallic salts of iron should not be given, as they are extremely likely to prove irritant, astringent and constipating. Pepto-Mangan (Gude) may be given, in such cases, with every assurance that the necessary iron and manganese will be promptly absorbed without irritating the gastric mucosa or inducing constipation. Children, especially, take it readily, because of its distinct palatability.

* * *

WHY USE MORPHIA?—The practice of using morphia for simple pains and neuralgics of different varieties cannot be too strongly condemned. As these preparations afford speedy relief, it is taken for granted without further consideration that they are precisely what the condition requires, and patients fly to their use on the slightest provocation without consulting their physicians at all. Such persons, long before they recognize the fact, learn to rely unconsciously upon morphia for relief, without realizing that they thus slowly drift under its pernicious influence, and in a short time absolutely require the drug independently of the original condition which induced its use. In almost all the cases of pain except, perhaps, those of the gravest surgical character, the exhibition of one of the approved derivatives of the coal tar series will be found amply sufficient in its anodyne and analgesic character to obtund all of the pain symptoms. Indeed, it is a matter of record that in the celebrated case of Barry, treated by Dr. A. V. L. Brokaw, Professor of Anatomy and Surgery, Missouri Medical College, and Surgeon to St. John's Hospital, where a thoracic wound, thirteen and a half inches in length, penetrating the lung cavity, was the feature, antikamnia tablets were used for the relief of pain, and it is now becoming quite a proposition with the profession as to whether morphia is not to be driven almost entirely from the field, in the broad general sense which has so long marked its use.

